Massachusetts Commercial Automobile Statistical Plan

Containing the Instructions and Codes Applicable to the Vehicles Rated in the Massachusetts Commercial Automobile Insurance Manual

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Massachusetts Commercial Automobile Statistical Plan Table of Contents

Table of Contents

			<u>Page</u>
Ι	Overv	view	I:1
II	Gener	al Rules	II:1
III	Gener	al Reporting Requirements	
	A.	Pemiums	III:1
	В.	Losses	III:6
IV	Repor	ting Instructions – Premiums	
	A.	Liability	IV:1
	B.	No-Fault	IV:7
	C.	Physical Damage	IV:12
V	Repor	ting Instructions – Losses	
	A.	Liability	V:1
	B.	No-Fault	V:8
	C.	Physical Damage	V:14
VI	Codin	g Section	VI:1
VII	Statist	tical Data Quality Program	
	A.	Statistical Data Quality Components	VII:1
	В.	Statistical Data Quality Penalties	VII:8
VIII	Recor	d Layouts	VIII:1
Apper	ndix A	Classification and Coverage Code Decision Tables	A:1
Apper	ndix B	Premium and Accident Town Tables	B:1
Index			C:1

Massachusetts Commercial Automobile Statistical Plan Part I - Overview

A. <u>SCOPE OF THE PLAN</u>

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The Massachusetts Commercial Automobile Statistical Plan is applicable to total automobile direct business written by a company on vehicles rated in accordance with the Massachusetts Commercial Automobile Insurance Manuals. This Plan also applies to vehicle classifications or coverages for which companies may file their own rates (e.g. antique automobiles). The Massachusetts Commercial Automobile Insurance Manuals, which are published by the Automobile Insurers Bureau of Massachusetts and by Commonwealth Automobile Reinsurers, should be used in conjunction with both the Massachusetts Commercial Automobile Statistical Plan and the various informational Accounting and Statistical Notices published periodically by Commonwealth Automobile Reinsurers. In order to assure that the statistical data reported to CAR is of the highest level of quality, the Massachusetts Commercial Automobile Statistical Plan provides companies with the necessary requirements, instructions and codes for reporting detailed statistical data for the following automobile insurance coverages to CAR:

Bodily Injury Liability Personal Injury Protection Uninsured Motorist Property Damage Liability Medical Payments Underinsured Motorist Physical Damage Pollution Liability

B. ORGANIZATION OF THE PLAN

The Massachusetts Commercial Automobile Statistical Plan is organized in the following major divisions:

- Part I Overview
- Part II General Rules
- Part III General Reporting Requirements (Premiums and Losses)
- Part IV Reporting Instructions Premiums
- Part V Reporting Instructions Losses
- Part VI Coding Section
- Part VII Statistical Data Quality Program
- Part VIII Record Layouts
- Appendix A Decision Tables Classification Code and Coverage Code
- Appendix B Premium and Accident Towns

The Overview Section introduces the Massachusetts Commercial Automobile Statistical Plan. It identifies the coverages for which this Plan is applicable, details the organization of this Plan, specifies the Statistical Plan's effective date and identifies how CAR informs users of updates to this Plan.

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The General Rules Section of this Plan describes company reporting requirements and the proper method for reporting data to CAR. The General Reporting Requirements Section of this Plan contains general information relative to the reporting of premium and loss data to CAR. The Reporting Instructions Sections of this Plan contain specifications for reporting each of the data fields required on the various premium and loss record layouts.

Last Revision Date: 01/01/2003

B. ORGANIZATION OF THE PLAN (Continued)

The Coding Section of this Plan identifies the possible values or codes that are valid for each of the data fields contained on the premium and loss record layouts. Data fields apply to all record layouts unless otherwise noted. If a specific data field only applies to a specific record layout or coverage, this will be indicated in the Coding Section. The Coding Section is divided into four subsections. The first section contains codes that are applicable to all record layouts. The remaining sections contain codes that are applicable to the individual liability, no-fault and physical damage record layouts.

The Statistical Data Quality Program Section of this Plan details the specifics of the Statistical Data Quality Program. The purpose of the Statistical Data Quality Program is to assure the quality and completeness of the data reported to CAR. This data is subsequently used for statistical, reinsurance and ratemaking functions. The Program is subdivided into two sections. The Statistical Data Quality Components Section contains CAR's expectations for reporting quality and timely statistical data, and the Statistical Data Quality Penalties Section contains associated reporting penalties.

The Record Layouts Section of this Plan identifies the required record layout format including appropriate field positions for statistical records reported to CAR. A Commercial Record Layout Modification Key precedes the record layouts and identifies the fields to which modifications have been made in prior years.

Appendix A of this Plan contains detailed Classification Code and Coverage Code Decision Tables. These Decision Tables shall be used to determine whether specific data fields are required for a particular classification or coverage code.

Appendix B of this Plan contains two tables of valid Premium and Accident Town Codes. One table is listed in alphabetical order and the other is listed in numerical order. These towns correspond to the rating towns in the Massachusetts Commercial Automobile Insurance Manual.

C. EFFECTIVE DATE OF THE PLAN

The Massachusetts Commercial Automobile Statistical Plan is applicable to policies with effective dates of January 1, 1981 and subsequent and contains revisions through the date noted on the cover page of this Plan. All policies and endorsements to such policies must contain the Statistical Plan coding and must be reported on the record format that was in effect for the particular policy effective year. Refer to the Commercial Automobile Statistical Plan applicable to the particular policy effective year.

★ D. <u>UPDATES TO THE PLAN</u>

The Massachusetts Commercial Automobile Statistical Plan, initially published in loose-leaf form, is available for viewing or downloading from CAR's website (www.commauto.com). The current year version, as well as prior year versions of the Plan are available. Since the Commercial Statistical Plan is now available electronically, paper copies of revised pages are no longer distributed to companies. Instead, CAR will publish an Accounting and Statistical Notice to notify companies of the revised pages and companies will be directed to CAR's website for further information. The revised pages will be available on CAR's website and will be incorporated in the electronic version of the applicable Plan.

The revised pages will be applicable to all new and renewal policies with effective dates on or after the date indicated in the lower left corner of the reprinted pages. Note that specific revisions will be indicated by a star (\bigstar) to the left of the line containing the revision. The date in the lower right corner of the page represents the date that the revised page was approved by the Massachusetts Division of Insurance. Any special reporting instructions will be provided to companies via an Accounting and Statistical Notice published by CAR.

Massachusetts Commercial Automobile Statistical Plan Part II - General Rules

A. <u>DATA REQUIREMENTS</u>

All premium, paid loss and outstanding loss transactions (both ceded to CAR and voluntarily written) must be reported with the accounting month that corresponds to the month in which the transaction was booked. Submissions for a particular accounting month must be received in statistically acceptable condition at the offices of CAR by the close of business on the established due date. Refer to the Statistical Data Quality Program Section of the Plan for additional information and potential penalties associated with this requirement.

1. Reporting Thresholds

When the Massachusetts automobile writings of a company which currently does not report statistical data to CAR exceeds the established reporting thresholds for statistically reportable coverages, statistical data beginning with that policy effective year must be reported to CAR on a monthly basis. Although the determination of whether a company exceeds the established thresholds is based upon the writings of an affiliated company group, statistical data must be reported to CAR on an individual company basis. Refer to item B. of this section. The thresholds for commercial business are \$50,000 in written premiums or \$25,000 in paid losses. Statistically reportable coverages are those coverages specified in the Massachusetts Commercial Automobile Statistical Plan. CAR verifies this data via the information recorded on the Exhibit of Premiums and Losses for the state of Massachusetts, which is contained on Page 15 of a company's Annual Statement for that calendar year. The reporting thresholds may be subject to yearly adjustments to reflect rate revisions and inflation. Refer to the Statistical Data Quality Components Section of Part VII – Statistical Data Quality Program for specific information on shipment reporting dates.

However, if a company cedes any business to CAR (refer to item C. of this section), then statistical data for all of the company's business, both ceded and voluntarily written, must be reported to CAR. This data must be reported regardless of whether the company's writings are below the reporting thresholds noted above.

2. Low Volume Companies

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Subject to CAR's approval, small companies may be permitted to report statistical data to CAR on a quarterly basis, rather than monthly. Companies or company groups that write less than \$500,000 in written premiums and less than \$500,000 in paid losses for statistically reportable coverages will be considered eligible for quarterly statistical reporting and are referred to as low volume companies. CAR verifies a company's volume of writings via the data recorded on the company's Massachusetts Annual Statement Page 15 for the most recent calendar year. Refer to Part VII - Statistical Data Quality Program for additional information and potential reporting penalties applicable to low volume companies.

A. DATA REQUIREMENTS (Continued)

3. Companies in a Run-Off Position

Companies in a run-off position that have stopped writing Massachusetts automobile business must continue to statistically report run-off premium, paid loss and outstanding loss activity on all ceded policies. Statistical data must continue to be reported until all ceded premium has been reported and all ceded losses have been paid or closed without payment or CAR has closed-out the ceded premium and/or loss statistical reporting for the particular policy effective year. Additionally, companies in a run-off position must continue to report statistical data for voluntarily written business, but only until their total written premiums and paid losses (both voluntary and ceded combined) are less than the reporting thresholds noted above.

★ 4. Reconciliation of Massachusetts Annual Statement Data

In addition to the above statistical reporting requirements, all companies that are licensed to write automobile insurance in the state of Massachusetts are required to submit an electronic copy of their NAIC Annual Statement filings to CAR on a yearly basis. Additionally, for each of the other three calendar quarters, companies must submit Massachusetts Annual Statement data via CAR's on-line Annual Statement Reconciliation System. This data must be submitted to CAR even if the company has no actual writings. On a quarterly basis, CAR reconciles a company's Massachusetts Annual Statement data to the data that the company has statistically reported to CAR. The reconciliation process is performed to verify the accuracy and completeness of the database utilized for statistical, ratemaking and reinsurance purposes. Specific information regarding the submission of Massachusetts Annual Statement data is detailed in a quarterly Accounting and Statistical Notice distributed by CAR and in the Technical User Guide for CAR's Online Annual Statement Reconciliation System. Refer to the Statistical Data Quality Program Section of this Plan for additional information and potential reporting penalties associated with the Massachusetts Annual Statement process.

5. Filing of Massachusetts Automobile Insurance Expense Call

Additionally, on an annual basis, each member of CAR is required to file a calendar year Massachusetts Automobile Insurance Expense Call. The Expense Call identifies expenses for the following general categories: Loss Adjustment Expenses, Commissions, Acquisition, Field Supervision and Collection Expenses, Taxes, Licenses and Fees and General Expenses. The Expense Call identifies the portion of total company expenses that are attributable to the cost of transacting automobile insurance business in Massachusetts. On a yearly basis, CAR distributes an Accounting and Statistical Notice that contains specific instructions relative to the Massachusetts Automobile Insurance Expense Call. Refer to the Statistical Data Quality Program Section of this Plan for additional information and potential reporting penalties associated with the Expense Call process.

B. <u>REPORTING METHOD</u>

The instructions that are set forth in the Reporting Instructions – Premiums and Reporting Instructions – Losses Sections of this Plan refer to records reported to CAR on magnetic tape, tape cartridge, or File Transfer Protocol (FTP) transmission. To obtain complete and detailed reporting instructions, refer to the CAR Statistical Edit Package that contains Accounting/Statistical Submission Reporting Instructions.

B. <u>REPORTING METHOD (Continued)</u>

The following general instructions apply:

- 1. Each premium and loss shall be reported on an individual transaction-by-transaction basis in accordance with the instructions and codes contained in this Plan.
- 2. Companies are responsible for the completeness and accuracy of their own data. Prior to the submission of statistics, the company shall perform an audit of the statistics being reported to detect and correct any error in the assignment of statistical codes contained in the Coding Section of this Plan.
- 3. All coding must be numeric except for the following fields: Producer Code, Policy Identification Number, Vehicle Identification Number and Company Use fields on premium records and Producer Code, Policy Identification Number, Claim Identification Number, Vehicle Identification Number and Company Use fields on loss records. These fields may be reported with any combination of alphanumeric codes. Fields reserved for future use must be reported with spaces or zero filled.
- 5. Data should be reported to CAR as follows:
 - a. Each submission must be filed on a monthly basis with the exception of outstanding loss records, which should be filed quarterly in the March, June, September and December shipments. The records must be submitted in accordance with the Call Schedule that is published annually as an Accounting and Statistical Notice.
 - b. For those companies affiliated with a group, statistical data must be reported to CAR at the individual company number level, rather than at the group company number level.
 - c. In order to assure that a company's submission of data for a particular accounting month is complete, all premium and paid loss data for each accounting month must be submitted to CAR in a single mailing. However, it is acceptable for quarterly outstanding loss data to be submitted separately.

If a company is not able to consolidate their shipments for mailing to CAR, a request for waiver from this requirement must be filed with CAR. If CAR grants a waiver to this requirement, it is necessary for the company to continue to submit their data shipments to CAR in the same manner for each subsequent accounting month.

d. Companies that have no statistical data to report to CAR must report a Nil Submission Form. This report will indicate that a company has no premium, paid loss and/or outstanding loss transactions to report for a specific month.

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B. <u>REPORTING METHOD (Continued)</u>

- 5. Data should be reported to CAR as follows (continued):
 - d. Each shipment of statistics must contain several control records that include control and summary totals relating to the statistics submitted. These totals must be in agreement with the data submitted for the period covered.
 - e. All reported data must be submitted on the appropriate record format as specified in the Record Layout Section of this Plan.

C. <u>RISKS CEDED TO COMMONWEALTH AUTOMOBILE REINSURERS</u>

All premiums and losses that are associated with risks ceded to Commonwealth Automobile Reinsurers must be reported to CAR. Premium and loss transactions for such ceded risks must be identified by the appropriate CAR Identification Code specified in the Coding Section of this Plan.

CAR's Plan and Rules of Operation require that the premium on ceded policies be reported at the full policy premium for cedable or total limits, regardless of the date of cession. Although only cedable limits or coverages will be covered by CAR, the full policy premium must be reported. When the total limits premium for a policy exceeds CAR's cedable limits, the portion that exceeds the cedable limit must be reported as a separate record utilizing the special non-cedable Classification Code. This code is identified in the Coding Section of this Plan as a Special Rating and Adjustment classification. The record also must be reported with the appropriate voluntary business CAR Identification Code. The premium amount reported would be the portion of premium that exceeds the cedable limit.

Risks that are initially written as voluntary business, but then ceded to CAR during the policy's term must be ceded as CAR business for the entire policy period. That is, offset and reenter adjustment entries must be reported to remove the record as voluntary business and replace it as CAR business, using the appropriate ceded CAR Identification Code and the <u>total</u> premium and exposure for the risk.

D. <u>ADJUSTMENTS (ENDORSEMENTS</u>)

An adjustment to a previously reported statistical record is made by reporting a complete offset of the original record and a new record that shows the proper (adjusted) statistical codes, exposure and/or dollar amounts. For adjustments (including endorsements) to premium records, the dollar amounts and exposure of the original and offsetting records must net to zero. For adjustment to loss records, the dollar amount and claim count of the original and offsetting records must net to zero.

For additional explanation and examples regarding the method for reporting adjustments or endorsements on premium records, refer to Section A – Premiums of the General Reporting Requirements Section of this Plan.

E. <u>REINSURANCE – OTHER THAN CAR</u>

Experience is to be reported on direct business only. Therefore, the reports of experience shall not include premiums received from or losses paid to other companies on account of reinsurance assumed by the reporting company, nor shall any deductions be made by the reporting company for reinsured premiums or for losses recovered from other companies on account of reinsurance.

Section A – Premiums

1. <u>REPORTING OF PREMIUMS</u>

A separate premium record must be reported for each unique set of data elements contained in this Plan. Premiums are reported on statistical records by coverage (liability, personal injury protection (PIP) or no-fault, and physical damage). All bodily injury liability premium records must contain the combined premium of each separately developed bodily injury liability premium (i.e. compulsory bodily injury, optional bodily injury, medical payments, underinsured motorists and uninsured motorists). All other premium records (property damage liability, PIP (no-fault), other than collision and collision) should contain the individually developed premium.

Companies have the option to report combined bodily injury liability premiums apart from property damage liability premiums, on separate statistical records. Similarly, other than collision and collision premiums may be reported on separate statistical records if desired.

Premium adjustments due to the application of Retrospective Rating Plan D must be reported on separate statistical records using the applicable Classification Code and Coverage Code. Retrospective Rating Plans are available for use on voluntary policies only.

2. <u>SINGLE LIMIT POLICIES</u>

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Single limit policies with separate premiums for bodily injury and property damage shall be reported using the appropriate Limits Identifier Code.

When reporting the bodily injury and property damage premium on one record, the combined single limit code shall be reported in the Bodily Injury Limits Code field with spaces or zeros in the Property Damage Limits Code field. Note also that if a property damage deductible has been offered, Property Damage Limits Code 08 may also be reported in the Property Damage Limits Code field. The corresponding bodily injury and property damage portions of the premium as determined by the single limit calculation shall then be reported in the appropriate Bodily Injury Premium Amount or Property Damage Premium Amount field.

When reporting bodily injury and property damage premium on two separate records, the records shall be reported in the following manner:

- a. For the bodily injury record, the limit code shall be reported in the Bodily Injury Limits Code field with spaces or zeros in the Property Damage Limits field. The bodily injury portion of the premium as determined by the single limit calculation, shall be reported in the Bodily Injury Premium field with spaces or zeros in the Property Damage Premium field.
- b. For the property damage record, the combined single limit code shall be reported in the Bodily Injury Limits field with spaces or zeros or Property Damage Limits Code 08 (indicating the existence of a property damage deductible) in the Property Damage Limits field. The Property Damage portion of the premium as determined by the single limit calculation, shall be reported in the Property Damage Premium field with spaces or zeros in the Bodily Injury Premium field.

For additional information relative to the single limit calculation, refer to the Massachusetts Commercial Automobile Insurance Manual.

Section A – Premiums

3. <u>REPORTING OF EXPOSURE</u>

Exposure is required as outlined in the Coding Section of this Plan. Exposure must be separately reported for each of the subdivisions of experience for which separate classification codes and exposure basis are shown. If the Classification and Coverage Code Decision Tables contained in Appendix A of this Plan indicate that exposure is not required for certain classification codes or coverage codes, then spaces or zeros must be reported in the Exposure field.

Refer to the Reporting Instructions and Coding Sections of this Plan for further instructions regarding the reporting of exposure.

4. <u>CHANGES IN COVERAGE BY ENDORSEMENT</u>

a. Endorsements Effective as of the Policy Effective Date

All original records affected by the change in coverage must be offset and new records must be reported with the revised codes. On the new records, all codes not impacted by the change in coverage shall remain the same. Both the offset and reenter records must be fully coded. The Transaction Effective Date should always equal the Policy Effective Date on the offset and reenter records.

The following is an example of liability endorsement records that would be reported to CAR due to a change in liability limits. The rate calculation would be affected, as indicated by the following premium adjustments:

Record	Тх- Туре	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Ехр	BI Premium	PD Premium	BI Limit	PD Limit
Original	11	06-00	06-00	06-01	+12	\$527	\$190	07	01
Offset	12	06-00	06-00	06-01	-12	-\$527	-\$190	07	01
Reenter	12	06-00	06-00	06-01	+12	\$812	\$289	09	07

b. Endorsements Effective Subsequent to the Policy Effective Date

All original records affected by the change must be offset to cancel the unearned premium and exposure. New records must be reported with the to-be-earned premium and exposure for the endorsed coverage and the revised codes. On the new records, all codes not impacted by the change in coverage shall remain the same. Both the offset and reenter records must be fully coded. The Transaction Effective Date on the offset and reenter records should be the effective date of the endorsement.

The following is an example of physical damage endorsement records that would be reported to CAR due to a change in vehicle subsequent to the effective date:

Record	Тх- Туре	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	OTC Prem	Coll Prem	VIN
Original	11	06-00	06-00	06-01	+12	\$72	\$250	JT3FJ62G1L1121580
Offset	12	06-00	12-00	06-01	-6	-\$36	-\$125	JT3FJ62G1L1121580
Reenter	12	06-00	12-00	06-01	+6	\$88	\$494	1J4H152K6TH450117

Section A – Premiums

4. <u>CHANGES IN COVERAGE BY ENDORSEMENT (Continued)</u>

b. Endorsements Effective Subsequent to the Policy Effective Date (Continued)

Changes by endorsement may be statistically reported on a coverage basis. For example, if the change is only for the bodily injury coverage, it is not necessary to include the corresponding property damage coverage information on the statistical record. However, any change to bodily injury premium must reflect the compulsory bodily injury, optional bodily injury, medical payments, uninsured motorists and underinsured motorist premiums, even if the change is limited to only one or some of the bodily injury coverages.

5. <u>CANCELLATION OF PREMIUMS</u>

When canceling premiums for a policy, all affected records must be individually offset (i.e. record by record) with the appropriate Transaction Type Code included on the cancellation record.

a. Flat Cancellation

For detailed information regarding flat cancellations, refer to the Commercial Automobile Insurance Manual. For a flat cancellation, the entry must be identical to the original entry except,

- i. The Exposure and Premium field(s) shall be shown as a credit
- ii. The Accounting Date shall be the month and year that the company booked the cancellation
- iii. The Transaction Type Code shall be 15

Record	Tx- Type	Actg- Date	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium
Original	11	04-00	01-00	01-00	01-01	+12	\$828	\$317
Cancellation	15	11-00	01-00	01-00	01-01	-12	-\$828	-\$317

b. Pro Rata Cancellation

For detailed information regarding pro rata cancellations, refer to the Massachusetts Commercial Automobile Insurance Manual. For a pro rata cancellation, the entry must be identical to the original entry except,

- i. The unearned portion of the premium shall be shown as a credit
- ii. The Transaction Effective Date shall be the effective date of the cancellation
- iii. The Accounting Date shall be the month and year that the company booked the cancellation
- iv. The Transaction Type Code shall be 13

Record	Tx- Type	Actg- Date	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium
Original	11	04-00	01-00	01-00	01-01	+12	\$716	\$269
Cancellation	13	11-00	01-00	06-00	01-01	-7	-\$403	-\$152

Refer to the Coding Section for the reporting of exposure on such transactions.

Section A – Premiums

5. <u>CANCELLATION OF PREMIUMS (Continued)</u>

c. Short Rate Cancellation

For detailed information regarding short rate cancellations, refer to the Massachusetts Commercial Automobile Insurance Manual. For a short rate cancellation, the entry must be identical to the original entry except,

- i. The unearned portion of the premium, calculated on the basis of the applicable short rate table (located in the Massachusetts Commercial Automobile Insurance Manual), shall be shown as a credit
- ii. The Transaction Effective Date shall be the effective date of the cancellation
- iii. The Accounting Date shall be the month and year that the company booked the cancellation
- iv. The Transaction Type Code shall be 13

Record	Tx- Type	Actg- Date	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Ехр	BI Premium	PD Premium
Original	11	04-00	01-00	01-00	01-01	+12	\$716	\$269
Cancellation	13	11-00	01-00	06-00	01-01	-7	-\$338	-\$130

Refer to the Coding Section for the reporting of exposure on such transactions.

6. **PREMIUM MODIFICATION**

The Experience Rating Modification Factor and the All Other Rating Modification Factor are developed based upon the requirements and parameters of the particular plan filed by a company. Examples of filed plans include Experience or Scheduled Rating Plans.

The Experience Modification Factor and the All Other Modification Factor measure the difference between the policy's manual premium and the total premium charged for the policy, and will result in either a credit or debit to the policy's manual premium. The manual premium is the premium that would result from the use of rates and rules prior to the application of the Experience Rating, Scheduled Rating or other filed Plans.

If the Factor is known at the time of policy issuance, report the adjusted premium amount as the policy's annual premium. If the Factor is not known at the time of policy issuance, report the manual premium amount and follow the endorsement procedures contained in both the General Rules Section and Section A – Premiums of the General Reporting Requirements of this Plan, once the adjusted premium amount has been determined.

Refer to the Coding Section for examples.

Section A – Premiums

7. <u>POLICIES SUBJECT TO AUDIT</u>

There are several types of policies for which coverage is initially provided on an estimated basis and then adjusted once the actual exposure is determined by an audit of the risk. At the time of policy issuance, deposit statistical transactions which contain an estimate of a policy's exposure and premium based on the previous year of experience, must be statistically reported. Deposit transactions must be coded in accordance with the Classification Code Decision Table contained in Appendix A of this Plan.

Once an audit of a policy has been completed, report any necessary adjustment (audit) transactions containing the required statistical coding using Transaction Type Code 16 (Audit) or Transaction Type Code 12 (Endorsement, Audit or Policy Extension).

The exposure and premium reported on an audit transaction may be reported net of the exposure and premium reported on the initial deposit transaction or may be reported in conjunction with an endorsement record to offset the initial deposit transaction.

8. <u>MULTIPLE YEAR POLICIES AND INSTALLMENT POLICIES</u>

Multiple year policies rated on an annual basis shall be reported in the same manner as one year policies. If the policy is written and rated for a period longer than one year, report the total policy premium for the full policy period and the total exposure for the full policy period.

The statistical reporting of policies not subject to audit written on an installment basis for terms not longer than one year is the same for policies written on a prepayment basis. Any interest or finance charge shall not be included in the premium reported for the policy.

9. <u>RULES FOR EXTENDING A POLICY</u>

A policyholder may request that his or her policy be extended. The statistical reporting for such extensions may be done by either of two methods: extension by endorsement or extension by cancellation and rewrite.

If the extension by endorsement method is used, the additional premium must be reported under the original policy number coded with Transaction Type Code 12. The Transaction Effective Date should be the date the extension took effect and the Policy Expiration Date should be the new expiration date.

If the extension is by cancellation and rewrite, a new policy number must be used and the unearned premium on the original policy must be credited in the same manner as any cancelled policy, coded with Transaction Type Code 13. All of the coding for the new policy will be done in the usual manner under the new policy, coded with Transaction Type Code 11.

Section A – Premiums

10. REPORTING TERRORISM COVERAGE

For all premium records, terrorism coverage information is identified in the Terrorism Coverage Code field. In situations where terrorism coverage is purchased in accordance with the Terrorism Risk Insurance Act of 2002 or if coverage for all other acts of terrorism not covered under the Act is purchased separately, a separate premium record is required to be reported to identify the premium associated with the terrorism coverage.

The terrorism coverage premium record must be coded using the statistical codes required for the Classification Code reported on the record, as indicated in Appendix A – Classification Decision Table. If the terrorism coverage premium has been determined on a policy level basis (i.e. one indivisible premium for terrorism coverage), for reporting purposes, the premium may be split in proportion to the underlying coverage on the policy.

Refer to Part VI – Coding Section for further information and examples for reporting terrorism coverage.

★ 11. BUSINESS INTERRUPTION COVERAGE

Business Interruption coverage provides coverage for the interruption of an insured's business resulting from direct and accidental loss or damage to scheduled property. This coverage is only applicable to voluntary policies.

Business Interruption coverage is identified with specific physical damage classification and coverage codes, and with an exposure basis representing the limit of insurance written on the endorsement schedule. For each scheduled item with a separate limit of insurance, an individual premium record is required to be reported for each item. For a group of multiple items with one single limit of insurance, one single premium record is required.

Section B – Losses

1. <u>REPORTING OF LOSSES</u>

Losses and allocated loss adjustment expenses must be reported on separate records with the applicable codes used to report the corresponding premium records in addition to the loss codes contained in the Coding Section of this Plan.

Allocated loss adjustment expenses must be submitted for all liability and PIP (no-fault) losses. For physical damage losses, allocated loss adjustment expenses are required only for ceded paid losses. However, allocated loss adjustment expenses for voluntary paid physical damage losses may be optionally reported.

\star 2. <u>DEFINITION OF A CLAIM</u>

a. Claim Definition

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For the purpose of this Plan, a claim shall be defined as:

- i. the loss incurred on account of bodily injury to any one individual arising out of any one accident for a particular coverage,
- ii. the loss for damage to the property, including loss of use, of any one individual (or legal entity) arising out of any one accident for which there is property damage coverage,
- iii. each individual loss arising under a physical damage coverage.

Section B – Losses

3. ACCIDENT REPORTING

Each accident must be uniquely identified within a given accident year. The Claim Identification Number must be used to uniquely identify the accident and claimant. If multiple coverages are involved, each coverage must be uniquely identified through the use of Coverage and Type of Loss Codes. Refer to the Reporting Instructions – Losses Section of this Plan for additional information on Claim Identification Number.

The following example illustrates several scenarios for reporting Claim Identification Number. Note that in all cases, the Claim Identification Number must be consistent for the liability and no-fault lines of business. Refer to methods 1, 2, and 3 of the example. However, it is not required for the physical damage Claim Identification Numbers to be consistent either with liability and no-fault or within physical damage. Refer to methods 2 and 3 of the example.

Sample Loss Scenario:

Company A's insured was in an accident for which he was at fault. The insured suffers injuries (\$9,000) plus lost wages (\$500) and his vehicle was damaged (\$2,100). The insured was also reimbursed for substitute transportation (\$900). The other driver was seriously injured (\$8,000), and his car was damaged (\$3,500). Company B paid for their driver's medical bills under PIP coverage and paid collision damage waiving the deductible. Company B then subrogated against the at-fault insured's insurance company. Company B also paid for a police report (\$10) and an independent medical exam (\$350) under PIP, which was included in their subrogation figure to Company A. Company B's insured then took court action against the at-fault driver for pain and suffering, etc. (\$10,000). Below is a summary of Company A's statistical reporting.

	Cubling	Type of	Coverence	Loss	Claim Identification Number			
Claimant	Subline Code	Loss Code	Coverage Code	Amount	Method 1	Method 2	Method 3	
	611	05		\$1,500	ABC010	ABC010	ABC010	
1	615	24		\$7,500	ABC010	ABC010	ABC010	
(Driver A)	615	34		\$500	ABC010	ABC010	ABC010	
(Driver A)	618	11	016	\$1,600	ABC010	ABC019	ABC019	
	618	09	083	\$900	ABC010	ABC019	ABC018	
	611	03		\$3,500	ABC020	ABC020	ABC020	
2 (Drivor P)	611	01		\$10,000	ABC020	ABC020	ABC020	
(Driver B)	611	11		\$9,160	ABC020	ABC020	ABC020	

Section B – Losses

4. <u>REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES</u>

a. Allocated Loss Adjustment Expenses (ALAE)

Allocated loss adjustment expenses are the following types of expenses paid by a company in connection with the adjustment of a specific claim. ALAE are to be reported as separate records, in the same detail as indemnity losses, using the appropriate Transaction Type Code. Transaction Type Code 27 represents paid legal expenses, Transaction Type Code 29 represents paid medical expenses, and Transaction Type Code 24 represents all other paid expenses. Transaction Type Code 22 represents outstanding allocated loss adjustment expenses.

Note that salvage pool expenses should not be reported as allocated loss adjustment expenses. Refer to the Subrogation Recoveries/Expenses portion of this section for additional details.

i. <u>Transaction Type Code 27</u>

The following are allowable legal allocated loss adjustment expenses:

- a) Arbitration, court, and other specific items of expense, such as stenography, witnesses and summonses (excluding medical), examinations under oath
- b) External attorney fees for claims in suit
- c) House counsel fees for claims in suit, excluding fees incurred to effect subrogation, provided that:
 - 1) The fees are computed at the same rate and by the same method as non-ceded claims,
 - 2) The fees reflect the total operating cost, including labor, on an individual suit basis and are substantiated by time statistics (Operational costs are defined as expenses which are normally contained in company overhead, such as rent, heat, electricity, benefits, etc., but excludes any items of profit)
- ii. Transaction Type Code 29

The following are allowable medical allocated loss adjustment expenses:

- a) Medical examinations to determine the extent of the company's liability
- b) Preferred provider network/organization service fee expenses incurred on a particular claim
- c) Expert medical or other evidence
- d) Laboratory and x-ray
- e) Autopsy
- f) Cost of medical records

Section B – Losses

4. <u>REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES</u> (Continued)

a. Allocated Loss Adjustment Expenses (ALAE) (Continued)

iii. Transaction Type Code 24

The following are allowable all other allocated loss adjustment expenses:

- a) Accident reconstruction
- b) Copies of documents
- c) Public records/police/fire reports (to the limit provided for by law)
- d) Motor vehicle registration search fees
- e) Appraisals of property (excluding motor vehicles)
- f) Special investigation of a claimant's background (including asset/credit reports)
- g) Engine oil, fluid analysis

b. Unallocated Loss Adjustment Expenses

Unallocated loss adjustment expenses are expenses paid by a company in settling a claim, that can not be directly allocated to a specific claim. Unallocated loss adjustment expenses are <u>not</u> to be reported. Examples of these expenses include:

- i. Overhead, salaries, and traveling expenses of company employees (other than amounts allocated as attorney fees for claims in suit)
- ii. Special investigations concerning the facts of the loss
- iii. Adjuster's fees, including those paid to independent adjusters and/or attorneys for adjusting claims (The term "adjusting" includes the investigation and adjustment of claims, the disposition of salvage, and the recovery of subrogation claims not in suit)
- iv. Fees for appraisals of motor vehicles, including preinspections and intensified appraisals
- v. Fees for retrieval of preinspection reports

5. <u>INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS</u>

The intercompany settlement reduces the dollars of loss charged against the insured to the extent he or she is free of fault by allowing his or her insurance company to recover from the carrier insuring the at-fault party.

When a PIP (no-fault) claim is established by a company (company #1) to cover damages caused by an atfault third party to one of its insureds, and the company subsequently takes subrogation action against the company (company #2) insuring the at-fault party, the PIP claim reported by company #1 must follow the no-fault reporting and coding instructions set forth in this Plan.

Section B – Losses

5. <u>INTERCOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS (Continued)</u>

The company being subrogated against (company #2) must establish a bodily injury liability claim to cover the amount of reimbursement to company #1. The reimbursement outstanding reserve and/or payment shall be coded to the vehicle at fault and shall be reported as an outstanding and/or paid loss with Type of Loss Code 11 or 14, depending upon the particulars of the claim. The amount of the reimbursement outstanding reserve and/or payment reported by company #2 shall include any reimbursement for allocated loss adjustment expense incurred by company #1 on its PIP claim, for medical, wage, and other economic loss, and for unallocated loss adjustment expense equal to 10% of the total amount of indemnity reimbursed. The sample loss scenario depicted previously in this section illustrates this reporting requirement under Claimant 2.

The reimbursement recovery received by company #1 shall be reported as a credit entry against the PIP claim using subrogation Transaction Type Code 26 and Type of Loss Code 45. Any allocated loss adjustment expense included in the recovery shall be reported as a separate record using the applicable allocated loss adjustment expense transaction type code and Type of Loss Code 45. Any unallocated loss adjustment expense included in the recovery must not be reported.

6. <u>INTRACOMPANY REIMBURSEMENTS RESULTING FROM PIP (NO-FAULT)</u> <u>CLAIMS</u>

When multiple PIP (no-fault) claims are established by the same company as the result of one accident involving two or more of its insureds, the company must determine the at-fault party and then establish a separate bodily injury claim to reimburse the insured not at fault. The statistical reporting requirements for these claims are identical to those explained for company #2 above.

7. <u>SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING</u> <u>FROM INTER/INTRACOMPANY REIMBURSEMENTS)</u>

When reporting the following types of subrogation recoveries, the records must contain all codes identical to the original entries, with the exception of the Transaction Type Code and the Accounting Date.

a. Indemnity Recoveries

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Subrogation recoveries of previously reported indemnity transactions must be identified by subrogation Transaction Type Code 26. Certain expenses incurred in effecting the recovery, not to exceed the original loss amount, can be deducted from the recovery amount or reported separately with a subrogation Transaction Type Code. Such expenses include:

- i. Attorney's fees and associated costs for claims in suit
- ii. Court costs
- iii. Location/address reports

<u>Section B – Losses</u>

7. <u>SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING</u> <u>FROM INTER/INTRACOMPANY REIMBURSEMENTS) (Continued)</u>

a. Indemnity Recoveries (Continued)

The following are expenses that can neither be deducted from the recovery amount nor reported separately:

- i. Cost of company employees
- ii. Collection agency fees
- iii. Subrogation recovery services

b. Allocated Loss Adjustment Expense Recoveries

Subrogation recoveries of a previously reported allocated loss adjustment expense transaction must be reported as offsets to the original entries, using applicable allocated loss adjustment expense Transaction Type Codes. Report Claim Count 0.

8. <u>SALVAGE RECOVERIES/EXPENSES</u>

Salvage recovery adjustments to previously reported collision, comprehensive, and property damage entries must be identified by salvage Transaction Type Code 25, and must contain all codes identical to the original entry, with the exception of the Transaction Type Code and the Accounting Date.

*

The following expenses incurred to effect salvage may be netted from the recovery amount or reported as a separate record with salvage Transaction Type Code 25:

- a. Original towing and storage charges, excluding losses resulting from towing and labor
- b. Haul fees to salvage yard
- c. Pool fees of commission
- d. Auction fees
- e. Salvage title fees (to the limit provided for by law)
- f. Salvage pool expenses

9. <u>AMOUNT OF PAID LOSS AND EXPENSE</u>

The loss to be reported shall be the amount of paid indemnity, medical, wage, or other economic loss pertaining to a single coverage of the policy for a particular claimant. In the case of PIP (no-fault), amounts reported must be prior to recovery via intracompany or intercompany reimbursements.

Liability and PIP expense reported is the allocated loss adjustment expense paid and/or outstanding for the particular claim or coverage/accident. Paid allocated loss adjustment expense on physical damage losses is only required on ceded business, but may be optionally reported for voluntary business.

Section B – Losses

10. EXTENT OF VEHICLE LOSS FOR PAID LOSSES

For each property damage liability and physical damage paid loss record reported, identify whether the loss is a total or a partial vehicle loss within the Partial/Total Loss Indicator field.

Regarding vehicle claims, a total loss is any loss where the insurer takes title to the damaged vehicle and gains the salvage value of the insured vehicle. (In certain cases the policyholder may retain title to the vehicle, but the estimated salvage value is deducted from the settlement. This satisfies the definition in that the insurer in fact took title and returned it to the insured upon being reimbursed for the estimated salvage value.)

A partial loss is any loss where the insurer makes payment to a policyholder of a dollar amount for the repair of the insured vehicle. The insured retains title to the vehicle. The partial/total loss status will remain as determined at first payment. All non-vehicle claims should be coded as partial losses.

Refer to the Coding Section of this Plan for specific instructions on reporting the Partial/Total Loss Indicator.

11. OUTSTANDING LOSSES (EXCLUDING PHYSICAL DAMAGE)

Outstanding losses shall be evaluated as of each quarter ending date and shall be reported in the method prescribed in the Annual Call Schedule.

Outstanding PIP (no-fault) losses may be subdivided between medical, wage, or all other economic losses, using applicable Type of Loss Codes, or outstanding PIP losses may be reported in total, using a non-split outstanding Type of Loss Code 23.

12. GLASS LOSSES

All glass losses should be reported with the appropriate Coverage Code and Type of Loss Code. Specifically,

- a. Individual glass damage losses should be reported with an other than collision Coverage Code and Type of Loss Code 03.
- b. Glass damage resulting from a collision should be reported with a collision Coverage Code and the appropriate Type of Loss Code.
- c. Glass damage resulting from an other than collision loss should be reported with an other than collision Coverage Code and the appropriate Type of Loss Code.

13. EXTRA-RISK RATING

Physical damage loss records should be coded to identify the appropriate extra-risk category as reported on the corresponding premium record. Refer to Section A – Premiums of the General Reporting Requirements Section of this Plan for additional information relative to extra-risk rating.

Section A – Liability

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year of the entry being reported. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

Report the month and year of the effective date of the transaction.

Transaction effective month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Transaction effective year requires a two (2) digit code in positions 12-13. Use the third and fourth positions of the transaction effective year of the entry being reported. For example, a transaction effective year of 2001 shall be reported as 01 in positions 12-13.

Section A – Liability

6. POLICY EXPIRATION DATE (Positions 14-16)

Report the month and year of the expiration date of the policy.

Policy expiration month requires a one (1) digit code in position 14. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy expiration year requires a two (2) digit code in positions 15-16. Use the third and fourth positions of the policy expiration year of the entry being reported. For example, a policy expiration year of 2002 shall be reported as 02 in positions 15-16.

7. <u>STATE CODE (Positions 17-18)</u>

Report State Code 20.

8. <u>PREMIUM TOWN CODE (Positions 19-21)</u>

For those risks that are not zone rated, report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town). However, if the risk is classified in accordance with the Public Transportation Section of the Massachusetts Commercial Automobile Insurance Manual, the Premium Town Code reported must be the highest rated city or town in which the vehicle is customarily operated.

For zone rated risks, report Premium Town Code 000.

If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state Premium Town Code.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

Section A – Liability

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 611.

14. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

15. LIMITS IDENTIFIER CODE (Position 36)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

15. BODILY INJURY LIMITS CODE (Positions 37-38)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

16. PROPERTY DAMAGE LIMIT CODE (Positions 39-40)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

17. MEDICAL PAYMENTS LIMIT CODE (Positions 41-42)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

18. UNINSURED MOTORIST LIMITS CODE (Positions 43-44)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

19. UNDERINSURED MOTORIST LIMITS CODE (Positions 45-46)

Report the two (2) digit numeric code. Refer to the Coding Section for applicable codes.

20. <u>Reserved for Future Use (Position 47)</u>

Report space or zero.

21. POLLUTION LIABILITY BROADENED COVERAGE CODE (Position 48)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

22. <u>ZONE RATING CODE (Positions 49-51)</u>

For zone rated risks, report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

For other than zone rated risks, report Zone Rating Code 000.

Section A – Liability

23. <u>AGE CODE (Position 52)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

24. AGGREGATE LIMITS IDENTIFIER CODE (Position 53)

Report the one (1) digit numeric code.

25. <u>Reserved for Future Use (Positions 54-55)</u>

Report spaces or zeros.

26. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

27. <u>Reserved for Future Use (Positions 57-58)</u>

Report spaces or zeros.

28. <u>RATING IDENTIFICATION CODE (Position 59)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

★ 29. <u>TERRORISM COVERAGE CODE (Position 60)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

30. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

31. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

Section A – Liability

32. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) digit ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

33. EXPOSURE (Positions 81-87)

Report exposure using the method appropriate for the vehicle's classification or coverage. Refer to the Coding Section for definitions and examples of calculating exposure under each of these methodologies.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

34. EXPERIENCE RATING MODIFICATION FACTOR CODE (Positions 88-90)

Report the three (3) digit numeric code that reflects the credit or debit applied to the reported premium. If no modification is applicable, report Experience Rating Modification Factor Code 100.

Refer to the Coding Section for examples.

35. ALL OTHER RATING MODIFICATION FACTOR CODE (Positions 91-93)

Report the three (3) digit numeric code that reflects the credit or debit applied to the reported premium. If no modification is applicable, report All Other Rating Modification Factor Code 100.

Refer to the Coding Section for examples.

36. <u>Reserved for Future Use (Positions 94-95)</u>

Report spaces or zeros.

37. BODILY INJURY PREMIUM AMOUNT (Positions 96-103)

Report the combined premium for the Bodily Injury, Optional Bodily Injury, Medical Payments, Uninsured Motorist and Underinsured Motorist coverages rounded to the nearest whole dollar.

The Bodily Injury Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

Section A – Liability

38. <u>PROPERTY DAMAGE PREMIUM AMOUNT (Positions 104-111)</u>

Report the property damage premium rounded to the nearest whole dollar.

The Property Damage Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 999999999 may be reported. Amounts must be right justified with leading zeros.

39. <u>Reserved for Future Use (Positions 112-114)</u>

Report spaces or zeros.

40. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

41. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the alphanumeric Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

42. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section B – No-Fault

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year of the entry being reported. For example, an effective year of 2001 shall be reported as 01 in positions 9-10.

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

Report the month and year of the effective date of the transaction.

Transaction effective month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Transaction effective year requires a two (2) digit code in positions 12-13. Use the third and fourth positions of the transaction effective year of the entry being reported. For example, a transaction effective year of 2001 shall be reported as 01 in positions 12-13.

Section B – No-Fault

6. POLICY EXPIRATION DATE (Positions 14-16)

Report the month and year of the expiration date of the policy.

Policy expiration month requires a one (1) digit code in position 14. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy expiration year requires a two (2) digit code in positions 15-16. Use the third and fourth positions of the policy expiration year of the entry being reported. For example, an expiration year of 2002 shall be reported as 02 in positions 15-16.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. <u>PREMIUM TOWN CODE (Positions 19-21)</u>

For those risks that are not zone rated, report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town). However, if the risk is classified in accordance with the Public Transportation Section of the Massachusetts Commercial Automobile Insurance Manual, the Premium Town Code reported must be the highest rated city or town in which the vehicle is customarily operated.

For zone rated risks, report Premium Town Code 000.

If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state Premium Town Code.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

10. <u>TYPE OF RISK CODE (Position 23)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. <u>SUBLINE CODE (Positions 27-29)</u>

Report Subline Code 615.

Section B – No-Fault

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. <u>Reserved for Future Use (Position 36)</u>

Report space or zero.

15. <u>PIP COVERAGE CODE (Position 37)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for the applicable code.

16. Reserved for Future Use (Positions 38-48)

Report spaces or zeros.

17. ZONE RATING CODE (Positions 49-51)

For zone rated risks, report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

For other than zone rated risks, report Zone Rating Code 000.

18. AGE CODE (Position 52)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

★ 19. <u>Reserved for Future Use (Positions 53-55)</u>

Report spaces or zeros.

20. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

21. <u>Reserved for Future Use (Positions 57-58)</u>

Report spaces or zeros.

Section B – No-Fault

22. RATING IDENTIFICATION CODE (Position 59)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

***** 23. <u>TERRORISM COVERAGE CODE (Position 60)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

24. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

25. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

26. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) digit ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

27. EXPOSURE (Positions 81-87)

Report exposure using the method appropriate for the vehicle's classification or coverage. Refer to the Coding Section for definitions and examples of calculating exposure under each of these methodologies.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

28. <u>EXPERIENCE RATING MODIFICATION FACTOR CODE (Positions 88-90)</u>

Report the three (3) digit numeric code that reflects the credit or debit applied to the reported premium. If no modification is applicable, report Experience Rating Modification Factor Code 100.

Refer to the Coding Section for examples.

Section B – No-Fault

29. ALL OTHER RATING MODIFICATION FACTOR CODE (Positions 91-93)

Report the three (3) digit numeric code that reflects the credit or debit applied to the reported premium. If no modification is applicable, report All Other Rating Modification Factor Code 100.

Refer to the Coding Section for examples.

30. <u>Reserved for Future Use (Positions 94-95)</u>

Report spaces or zeros.

31. PIP (NO-FAULT) PREMIUM AMOUNT (Positions 96-103)

Report the PIP premium rounded to the nearest whole dollar.

The PIP Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

32. <u>Reserved for Future Use (Positions 104-114)</u>

Report spaces or zeros.

33. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

34. <u>VEHICLE IDENTIFICATION NUMBER (Positions 131-147)</u>

Report the alphanumeric Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

35. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

<u>Section C – Physical Damage</u>

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. <u>ACCOUNTING DATE (Positions 6-7)</u>

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand (&) symbol for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year of the entry being reported. For example, an effective year of 2001 shall be reported as 01 in positions 9-10.

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

Report the month and year of the effective date of the transaction.

Transaction effective month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Transaction effective year requires a two (2) digit code in positions 12-13. Use the third and fourth positions of the transaction effective year of the entry being reported. For example, a transaction effective year of 2001 shall be reported as 01 in positions 12-13.

<u>Section C – Physical Damage</u>

6. POLICY EXPIRATION DATE (Positions 14-16)

Report the month and year of the expiration date of the policy.

Policy expiration month requires a one (1) digit code in position 14. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy expiration year requires a two (2) digit code in positions 15-16. Use the third and fourth positions of the policy expiration year of the entry being reported. For example, an expiration year of 2002 shall be reported as 02 in positions 15-16.

7. <u>STATE CODE (Positions 17-18)</u>

Report State Code 20.

8. <u>PREMIUM TOWN CODE (Positions 19-21)</u>

For those risks that are not zone rated, report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town). However, if the risk is classified in accordance with the Public Transportation Section of the Massachusetts Commercial Automobile Insurance Manual, the Premium Town Code reported must be the highest rated city or town in which the vehicle is customarily operated.

For zone rated risks, report Premium Town Code 000.

If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state Premium Town Code.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

10. <u>TYPE OF RISK CODE (Position 23)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 618.

<u>Section C – Physical Damage</u>

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code assigned to the vehicle or coverage. Refer to the Coding Section for applicable codes.

14. <u>Reserved for Future Use (Position 36)</u>

Report space or zero.

15. OTHER THAN COLLISION COVERAGE CODE (Positions 37-39)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

16. COLLISION COVERAGE CODE (Positions 40-42)

Report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

17. <u>Reserved for Future Use (Positions 43-44)</u>

Report spaces or zeros.

18. <u>SYMBOL CODE (Positions 45-46)</u>

Report the two (2) digit numeric code that represents the cost new or value (for Commercial Motorcycles) assigned to the vehicle for the transaction being reported. Refer to the Coding Section for applicable codes and examples.

19. PRE-INSURANCE INSPECTION IDENTIFICATION CODE (Position 47)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

20. <u>Reserved for Future Use (Position 48)</u>

Report space or zero.

21. ZONE RATING CODE (Positions 49-51)

For zone rated risks, report the three (3) digit numeric code. Refer to the Coding Section for applicable codes.

For other than zone rated risks, report Zone Rating Code 000.

22. AGE CODE (Position 52)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

<u>Section C – Physical Damage</u>

23. <u>ANTI-THEFT DEVICE DISCOUNT CODE (Position 53)</u>

Report the one (1) character alphanumeric code. Refer to the Coding Section for applicable codes.

★ 24. <u>Reserved for Future Use (Positions 54 - 55)</u>

Report spaces or zeros.

★ 25. <u>ORIGINAL COST NEW CODE (Positions 56-58)</u>

Report the three (3) digit numeric code rounded to the nearest thousand dollars. Refer to the Coding Section for examples.

26. RATING IDENTIFICATION CODE (Position 59)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

27. <u>TERRORISM COVERAGE CODE (Position 60)</u>

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

28. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. Note that a unique Producer Code is required to be reported for each agency office location. This field must be left justified with no spaces between significant digits. If the Producer Code reported is less than six (6) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

29. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

30. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code which represents the location of principal garaging of the vehicle for which the transaction is being reported. If the vehicle has no principal place of garaging in Massachusetts (i.e. out-of-state), use the appropriate out-of-state ZIP Code.

ZIP Code must be left justified with no spaces between significant digits. If a five (5) position ZIP Code is reported, report spaces in all unused positions.

Refer to the Coding Section for examples.

<u>Section C – Physical Damage</u>

31. EXPOSURE (Positions 81-87)

Report exposure using the method appropriate for the vehicle's classification or coverage. Refer to the Coding Section for definitions and examples of calculating exposure under each of these methodologies.

The Exposure field is a numeric field where all negative values must be reported as signed. Any value from -9999999 to 9999999 may be reported. Exposure must be right justified with leading zeros.

32. EXPERIENCE RATING MODIFICATION FACTOR CODE (Positions 88-90)

Report the three (3) digit numeric code that reflects the credit or debit applied to the reported premium. If no modification is applicable, report Experience Rating Modification Factor Code 100.

Refer to the Coding Section for examples.

33. ALL OTHER RATING MODIFICATION FACTOR CODE (Positions 91-93)

Report the three (3) digit numeric code that reflects the credit or debit applied to the reported premium. If no modification is applicable, report All Other Rating Modification Factor Code 100.

Refer to the Coding Section for examples.

34. <u>Reserved for Future Use (Positions 94-95)</u>

Report spaces or zeros.

35. OTHER THAN COLLISION PREMIUM AMOUNT (Positions 96-103)

Report the other than collision premium rounded to the nearest whole dollar.

The Other Than Collision Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 999999999 may be reported. Amounts must be right justified with leading zeros.

36. COLLISION PREMIUM AMOUNT (Positions 104-111

Report the collision premium rounded to the nearest whole dollar.

The Collision Premium Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

37. <u>Reserved for Future Use (Positions 112-114)</u>

Report spaces or zeros.

<u>Section C – Physical Damage</u>

38. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the policy number or any other alphanumeric combination of characters that will make it possible to locate the policy record within company files. The number must consist only of significant alphanumeric characters.

This field must be left justified and must be at least three (3) alphanumeric characters with no spaces between significant digits. If the Policy Identification Number reported is less than sixteen (16) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

39. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the alphanumeric Vehicle Identification Number of the vehicle for which the transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

40. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section A – Liability

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. <u>ACCOUNTING DATE (Positions 6-7)</u>

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy for which the loss transaction is being reported.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. <u>ACCIDENT DATE (Positions 11-15)</u>

Report the month, day, and year of the date on which the accident occurred.

Accident month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accident day requires a two (2) digit code in positions 12-13.

Section A – Liability

5. ACCIDENT DATE (Positions 11-15) (Continued)

Accident year requires a two (2) digit code in positions 14-15. Use the third and fourth positions of the year in which the accident occurred. For example, an accident that occurred in the year 2001 shall be reported as 01 in positions 14-15.

6. <u>Reserved for Future Use (Position 16)</u>

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code. The Premium Town Code on the loss record must match the Premium Town Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

Report the one (1) digit numeric code. The CAR Identification Code on the loss record must match the CAR Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. The Type of Risk Code on the loss record must match the Type of Risk Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 611.

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

Section A – Liability

14. LIMITS IDENTIFIER CODE (Position 36)

Report the one (1) digit numeric code. The Limits Identifier Code on the loss record must match the Limits Identifier Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

★ 15. <u>LIABILITY LIMITS CODE (Positions 37-38)</u>

Report the two (2) digit numeric code for the limit under which the loss was incurred.

Refer to the Coding Section for applicable codes.

16. <u>Reserved for Future Use (Position 39)</u>

Report space or zero.

17. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in accidents out-of-state must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

18. <u>Reserved for Future Use (Positions 43-47)</u>

Report spaces or zeros.

19. POLLUTION LIABILITY BROADENED COVERAGE CODE (Position 48)

Report the one (1) digit numeric code. The Pollution Liability Broadened Coverage Code on the loss record must match the Pollution Liability Broadened Coverage Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

20. ZONE RATING CODE (Positions 49-51)

Report the three (3) digit numeric code. The Zone Rating Code on the loss record must match the Zone Rating Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

For other than zone rated risks, report Zone Rating Code 000.

Section A – Liability

21. <u>AGE CODE (Position 52)</u>

Report the one (1) digit numeric code. The Age Code on the loss record must match the Age Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

22. AGGREGATE LIMITS IDENTIFIER CODE (Position 53)

Report the one (1) digit numeric code. The Aggregate Limits Identifier Code on the loss record must match the Aggregate Limits Identifier Code in effect as of the date of loss, from the policy's corresponding premium record.

★ 23. <u>Reserved For Future Use (Position 54)</u>

Report space or zero.

24. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

Report the one (1) digit numeric code that indicates the damage to the vehicle involved in the accident. Refer to the Coding Section for applicable codes.

25. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. The Passive Restraint Device Discount Code on the loss record must match the Passive Restraint Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

26. <u>Reserved for Future Use (Positions 57-58)</u>

Report spaces or zeros.

27. <u>RATING IDENTIFICATION CODE (Position 59)</u>

Report the one (1) digit numeric code. The Rating Identification Code on the loss record must match the Rating Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

28. <u>Reserved for Future Use (Position 60)</u>

Report space or zero.

Section A – Liability

29. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

30. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

31. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

32. <u>Reserved for Future Use (Position 81)</u>

Report space or zero.

33. <u>REPORTING DATE (Positions 82-84)</u>

Report the month and year in which the claim was established. Reporting month requires a one (1) digit code in position 82. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Reporting year requires a two (2) digit code in positions 83-84. Use the third and fourth positions of the year in which the claim was established. For example, a claim established in the year 2001 shall be reported as 01 in positions 83-84.

34. <u>Reserved for Future Use (Positions 85-86)</u>

Report spaces or zeros.

35. <u>TYPE OF LOSS CODE (Positions 87-88)</u>

Report the two (2) digit numeric code that describes the liability type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

Section A – Liability

★ 36. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

37. LOSS AMOUNT (Positions 91-98)

Report the amount of the liability loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

38. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no blanks between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report blanks in all unused positions.

Refer to the Coding Section for examples.

39. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

Section A – Liability

40. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

41. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Section B – No-Fault

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth positions of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. **POLICY EFFECTIVE DATE (Positions 8-10)**

Report the month and year of the effective date of the policy for which the loss transaction is being reported.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth position of the policy effective year. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. ACCIDENT DATE (Positions 11-15)

Report the month, day, and year of the date on which the accident occurred.

Accident month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accident day requires a two (2) digit code in positions 12-13.

Section B – No-Fault

5. ACCIDENT DATE (Positions 11-15) (Continued)

Accident year requires a two (2) digit code in positions 14-15. Use the third and fourth positions of the year in which the accident occurred. For example, an accident that occurred in the year 2001 shall be reported as 01 in positions 14-15.

6. <u>Reserved for Future Use (Position 16)</u>

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code. The Premium Town Code on the loss record must match the Premium Town Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

Report the one (1) digit numeric code. The CAR Identification Code on the loss record must match the CAR Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. The Type of Risk Code on the loss record must match the Type of Risk Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 615.

Section B – No-Fault

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code.

The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. <u>Reserved for Future Use (Position 36)</u>

Report space or zero.

15. PIP COVERAGE CODE (Position 37)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable code.

16. <u>Reserved for Future Use (Positions 38-39)</u>

Report spaces or zeros.

17. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

18. <u>Reserved for Future Use (Positions 43-48)</u>

Report spaces or zeros.

19. ZONE RATING CODE (Positions 49-51)

Report the three (3) digit numeric code. The Zone Rating Code on the loss record must match the Zone Rating Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

For other than zone rated risks, report Zone Rating Code 000.

20. AGE CODE (Position 52)

Report the one (1) digit numeric code. The Age Code on the loss record must match the Age Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

Section B - No-Fault

★ 21. <u>Reserved for Future Use (Positions 53-55)</u>

Report spaces or zeros.

22. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

Report the one (1) digit numeric code. The Passive Restraint Device Discount Code on the loss record must match the Passive Restraint Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

23. <u>Reserved for Future Use (Positions 57-58)</u>

Report spaces or zeros.

24. RATING IDENTIFICATION CODE (Position 59)

Report the one (1) digit numeric code. The Rating Identification Code on the loss record must match the Rating Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

25. <u>Reserved for Future Use (Position 60)</u>

Report space or zero.

26. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

27. <u>Reserved for Future Use (Positions 67-71)</u>

Report spaces or zeros.

Section B – No-Fault

28. ZIP CODE (Positions 72-80)

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

29. <u>Reserved for Future Use (Positions 81-86)</u>

Report spaces or zeros.

30. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the PIP (no-fault) type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 31. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

32. LOSS AMOUNT (Positions 91-98)

Report the amount of the PIP loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

33. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no blanks between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report blanks in all unused positions.

Refer to the Coding Section for examples.

Section B – No-Fault

34. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the policy's corresponding premium record.

Refer to the Coding Section for examples.

35. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

36. COMPANY USE (Positions 148-150)

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

<u>Section C – Physical Damage</u>

1. <u>COMPANY OR GROUP NUMBER CODE (Positions 1-3)</u>

Report the three (3) digit numeric code assigned by CAR.

2. TRANSACTION TYPE CODE (Positions 4-5)

Report the two (2) digit numeric code that represents the transaction being reported. Refer to the Coding Section for applicable codes.

3. ACCOUNTING DATE (Positions 6-7)

Report the month and year of the accounting date of the shipment. This date should correspond to the date reported on the transmittal control record associated with the shipment.

Accounting month requires a one (1) digit code in position 6. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accounting year requires a one (1) digit code in position 7. Use the fourth position of the year from the accounting date of the shipment. For example, an accounting year of 2001 shall be reported as 1 in position 7.

4. <u>POLICY EFFECTIVE DATE (Positions 8-10)</u>

Report the month and year of the effective date of the policy for which the loss transaction is being reported.

Policy effective month requires a one (1) digit code in position 8. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Policy effective year requires a two (2) digit code in positions 9-10. Use the third and fourth positions of the policy effective year. For example, a policy effective year of 2001 shall be reported as 01 in positions 9-10.

5. ACCIDENT DATE (Positions 11-15)

Report the month, day, and year of the date on which the accident occurred.

Accident month requires a one (1) digit code in position 11. Use codes 1-9 to indicate the months of January through September and use zero (0) for the month of October, the dash symbol (-) for the month of November, and the ampersand symbol (&) for the month of December.

Accident day requires a two (2) digit code in positions 12-13.

<u>Section C – Physical Damage</u>

5. ACCIDENT DATE (Positions 11-15) (Continued)

Accident year requires a two (2) digit code in positions 14-15. Use the third and fourth position of the year in which the accident occurred. For example, an accident that occurred in the year 2001 shall be reported as 01 in positions 14-15.

6. <u>Reserved for Future Use (Position 16)</u>

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

8. PREMIUM TOWN CODE (Positions 19-21)

Report the three (3) digit numeric code. The Premium Town Code on the loss record must match the Premium Town Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to Appendix B for applicable codes.

9. <u>CAR IDENTIFICATION CODE (Position 22)</u>

Report the one (1) digit numeric code. The CAR Identification Code on the loss record must match the CAR Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

10. TYPE OF RISK CODE (Position 23)

Report the one (1) digit numeric code. The Type of Risk Code on the loss record must match the Type of Risk Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

11. ANNUAL STATEMENT LINE OF BUSINESS CODE (Positions 24-26)

Report the three (3) digit numeric code corresponding to the Annual Statement Line of Business to which the transaction was assigned. Refer to the Coding Section for applicable codes.

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 618.

<u>Section C – Physical Damage</u>

13. CLASSIFICATION CODE (Positions 30-35)

Report the six (6) digit numeric code. The Classification Code on the loss record must match the Classification Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

14. <u>Reserved for Future Use (Position 36)</u>

Report space or zero.

15. <u>COVERAGE CODE (Positions 37-39)</u>

Report the three (3) digit numeric code for the coverage under which the loss was incurred. Refer to the Coding Section for applicable codes.

16. ACCIDENT TOWN CODE (Positions 40-42)

Report the three (3) digit numeric code that represents the town in which the accident occurred.

Claims charged to vehicles involved in out-of-state accidents must be reported with the appropriate out-of-state Accident Town Code.

Refer to Appendix B for applicable codes.

17. <u>Reserved for Future Use (Positions 43-44)</u>

Report spaces or zeros.

18. <u>SYMBOL CODE (Positions 45-46)</u>

Report the two (2) digit numeric code. The Symbol Code on the loss record must match the Symbol Code in effect as of the date of loss from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

19. INTENSIFIED APPRAISAL IDENTIFICATION CODE (Position 47)

Report the one (1) digit numeric code. Refer to the Coding Section for applicable codes.

20. <u>Reserved for Future Use (Position 48)</u>

Report spaces or zeros.

<u>Section C – Physical Damage</u>

21. ZONE RATING CODE (Positions 49-51)

Report the three (3) digit numeric code. The Zone Rating Code on the loss record must match the Zone Rating Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

For other than zone rated risks, report Zone Rating Code 000.

22. AGE CODE (Position 52)

Report the one (1) digit numeric code. The Age Code on the loss record must match the Age Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

23. ANTI-THEFT DEVICE DISCOUNT CODE (Position 53)

Report the one (1) character alphanumeric code. The Anti-Theft Device Discount Code on the loss record must match the Anti-Theft Device Discount Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

24. <u>Reserved for Future Use (Position 54)</u>

Report space or zero.

25. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

Report the one (1) digit numeric code that indicates the damage to the vehicle involved in the accident. Refer to the Coding Section for applicable codes.

★ 26. <u>ORIGINAL COST NEW CODE (Positions 56-58)</u>

Report the three (3) digit numeric code. The Original Cost New Code on the loss record must match the Original Cost New Code in effect as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding section for examples.

27. RATING IDENTIFICATION CODE (Position 59)

Report the one (1) digit numeric code. The Rating Identification Code on the loss record must match the Rating Identification Code from the policy's corresponding premium record. Refer to the Coding Section for applicable codes.

28. <u>Reserved for Future Use (Position 60)</u>

Report space or zero.

Section C – Physical Damage

29. PRODUCER CODE (Positions 61-66)

Report the six (6) character alphanumeric code. The Producer Code on the loss record must match the Producer Code from the policy's corresponding premium record.

Refer to the Coding Section for examples.

30. Reserved for Future Use (Position 67-71)

Report spaces or zeros.

31. <u>ZIP CODE (Positions 72-80)</u>

Report the five (5) or nine (9) digit numeric code. The ZIP Code on the loss record must match the ZIP Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Refer to the Coding Section for examples.

32. <u>Reserved for Future Use (Position 81-84)</u>

Report spaces or zeros.

33. CATASTROPHE CODE (Positions 85-86)

Catastrophe Code is a serial number assigned by the Insurance Services Offices (ISO) to a natural disaster. Report the applicable two (2) digit numeric Catastrophe Code. If not applicable, report spaces or zeros.

Refer to CAR's Statistical Edit Package for a list of applicable codes.

34. TYPE OF LOSS CODE (Positions 87-88)

Report the two (2) digit numeric code that describes the physical damage type of loss associated with the accident for which the transaction is being reported. Refer to the Coding Section for applicable codes.

★ 35. <u>Reserved for Future Use (Positions 89-90)</u>

Report spaces or zeros.

<u>Section C – Physical Damage</u>

36. LOSS AMOUNT (Positions 91-98)

Report the amount of the physical damage loss rounded to the nearest whole dollar.

The Loss Amount field is a numeric field where all negative values must be reported as signed. Any value from -999999999 to 99999999 may be reported. Amounts must be right justified with leading zeros.

37. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

Report the Claim Identification Number or any other alphanumeric combination of characters that will make it possible to locate the claim record within company files. The number must consist only of significant alphanumeric characters.

The same claim number must be used to identify payments to a particular claimant for all liability and PIP (no-fault) coverages. For physical damage claims, it is acceptable to use a different claim number to identify payments under more than one physical damage coverage. Payments are then distinguished by coverage and within coverage by means of the applicable Type of Loss Code.

This field must be left justified and must be at least three (3) alphanumeric characters with no blanks between significant digits. If the Claim Identification Number reported is less than sixteen (16) characters, report blanks in all unused positions.

Refer to the Coding Section for examples.

38. POLICY IDENTIFICATION NUMBER (Positions 115-130)

Report the sixteen (16) position alphanumeric code. The Policy Identification Number on the loss record must match the Policy Identification Number from the corresponding premium record.

Refer to the Coding Section for examples.

39. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

Report the Vehicle Identification Number that corresponds to the vehicle for which the loss transaction is being reported.

This field must be left justified and must be at least five (5) alphanumeric characters with no spaces between significant digits. If the Vehicle Identification Number is less than seventeen (17) characters, report spaces in all unused positions.

Refer to the Coding Section for examples.

40. <u>COMPANY USE (Positions 148-150)</u>

This field is for company use only and may be reported with spaces, zeros, or may contain any alphanumeric combination that suits the individual company's purposes.

Liability, No-Fault, and Physical Damage

This section applies to all records

TRANSACTION TYPE CODE

Premium Codes			
Transaction Type	Liability Subline 611	No-Fault Subline 615	Physical Damage Subline 618
New or Renewal	11	11	11
Endorsement or Audit or Policy Extension	12	12	12
Cancellation of Policy Pro Rata or Short Rate	13	13	13
Reinstatement	14	14	14
Cancelled Flat	15	15	15
Audit	16	16	16

Loss Codes			
Transaction Type	Liability Subline 611	No-Fault Subline 615	Physical Damage Subline 618
Outstanding Loss	21	21	
Outstanding Allocated Loss Adjustment Expense	22	22	
Paid Loss	23	23	23
Paid All Other Allocated Loss Adjustment Expense	24	24	24 *
Salvage Recoveries	25		25
Subrogation Recoveries	26	26	26
Paid Legal Allocated Loss Adjustment Expense	27	27	27 *
Paid Medical Allocated Loss Adjustment Expense	29	29	

* Reporting Paid Allocated Loss Adjustment expenses on physical damage losses is required for ceded business and optional for voluntary business.

STATE CODE

State	Code
Massachusetts	20

CAR IDENTIFICATION CODE

★	Description (Policy Effective Years 2006 and subsequent)	Code
	Voluntary Business (retained) from Voluntary Agents or written directly by the company (Representative Producers)	0
★	Voluntary Business (retained) from Exclusive Representative Producers (No Voluntary Contract) or from Voluntary Agents assigned to a Servicing Carrier, with whom the carrier does not have a voluntary contract	1
	Ceded Business from Voluntary Agents or written directly by the company (Representative Producers)	4
★	Ceded Business from Exclusive Representative Producers (No Voluntary Contract) or from Voluntary Agents assigned to a Servicing Carrier, with whom the carrier does not have a voluntary contract	5

★	Description (Policy Effective Years 1995 through 2005)	
	Voluntary Business (retained) from Voluntary Agents or written directly by the company (Representative Producers)	0
	Voluntary Business (retained) from Exclusive Representative Producers (No Voluntary Contract)	1
	Ceded Business from Voluntary Agents or written directly by the company (Representative Producers)	4
	Ceded Business from Exclusive Representative Producers (No Voluntary Contract)	5

CAR IDENTIFICATION CODE (Continued)

Description (Policy Effective Years 1994 and prior)	
Voluntary Business from Voluntary AgentsVoluntary Business (not ceded) from Voluntary Agents or written directly by the company	0
 Voluntary Business from Representative Producers (No Voluntary Contract) Voluntary Business (not ceded) from a Representative Producer that does not have a voluntary motor vehicle insurance contract with their assigned Servicing Carrier, but does not meet the criteria for CAR ID Code 3 as defined below. 	1
 Voluntary Business from Subsidiary (Affiliated) Agencies Voluntary Business (not ceded) from a subsidiary agency whose parent agency has a voluntary motor vehicle insurance contract with the Servicing Carrier, pursuant to Rule 14 of the CAR Rules of Operation. 	2
 Ceded Business from a Former Designated Broker Ceded Business from a producer, appointed to the Servicing Carrier as a Designated Broker (as defined in the Facility Rules of Operation) prior to January 1, 1984, and that producer has not had a voluntary motor vehicle insurance contract with that Servicing Carrier subsequent to the date of the appointment as a Designated Broker. This status survives a change of Servicing Carrier, which has been granted pursuant to Rule 14 of the CAR Rules of Operation. 	3
Ceded Business from Voluntary AgentsCeded Business from Voluntary Agents or written directly by the company	4
Ceded Business from Representative Producers (No Voluntary Contract) Ceded Business as defined for CAR ID Code 1 	5
Ceded Business from Subsidiary (Affiliated) Agencies Ceded Business from a subsidiary agency, as defined for CAR ID Code 2 	6
 Voluntary Business from a Former Designated Broker Voluntary Business (not ceded) from a former Designated Broker, as defined for CAR ID Code 3 	7
 Voluntary Business from Representative Producers (No Voluntary Contract) Voluntary Business (not ceded) from a Representative Producer where the producer had a voluntary contract with its Servicing Carrier, and the contract was cancelled on or after November 22, 1988. 	8
 Ceded Business from Representative Producers (No Voluntary Contract) Ceded Business from a Representative Producer where the producer had a voluntary contract with its Servicing Carrier, and the contract was cancelled on or after November 22, 1988. 	9

TYPE OF RISK CODE

Description	Code
Regular Business (Massachusetts Motor Vehicle Policies and Risks not coded below)	1
Mass Merchandising and Group Marketing - Optional	3
Business Not Subject to the Compulsory Law and not Mass Merchandising or Group Marketing	7

ANNUAL STATEMENT LINE OF BUSINESS CODE

Description	Line of Business	Code
Private Passenger Auto No-Fault (Personal Injury Protection)	19.1	191
Other Private Passenger Auto Liability	19.2	192
Commercial Auto No-Fault (Personal Injury Protection)	19.3	193
Other Commercial Auto Liability	19.4	194
Private Passenger Auto Physical Damage	21.1	211
Commercial Auto Physical Damage	21.2	212

SUBLINE CODE

Subline	Code
Liability	611
PIP (No-Fault)	615
Physical Damage	618

CLASSIFICATION CODE

TRUCKS, TRACTORS, AND TRAILERS

ANALYSIS OF CLASSIFICATION CODING SYSTEM

Description: First Position	Code
Size	Code
Light Trucks	0
Medium Trucks	2
Heavy Trucks	3
Heavy Truck-Tractors	3
Extra-Heavy Trucks	4
Extra-Heavy Truck-Tractors	5
Trailer Types	6

Description: Second Position	Code
Business Use	Code
Trucks – Service Use	1
Trucks – Retail Use	2
Trucks – Commercial Use	3
Heavy Truck-Tractors – Service Use	4
Heavy Truck-Tractors – Retail Use	5
Heavy Truck-Tractors – Commercial Use	6
Trailer Types – Semitrailers	7
Trailer Types – Trailers	8
Trailer Types – Service or Utility Trailers	9
Extra-Heavy Trucks	0
Extra-Heavy Truck-Tractors	0

Description: Third Position		Code
Radius of Operations		Code
	Local (0 – 50 Miles)	1
Non-Fleet Class	Intermediate (51 – 200 Miles)	2
	Long Distance (Over 200 Miles)	3
	Local (0 – 50 Miles)	4
Fleet Class	Intermediate (51 – 200 Miles)	5
	Long Distance (Over 200 Miles)	6

Description: Fourth and Fifth Positions	Code
Secondary Class Codes	1# — 9#

Description: Sixth Position	Code
Insert Zero	0

CLASSIFICATION CODE

TRUCKS, TRACTORS, AND TRAILERS

Primary Classification Code (First three positions)

	Class	Business Use	Radius		
Size	Туре		Local Up to 50 Miles	Intermediate 51-200 Miles	Long Distance Over 200 Miles
		Service	011	012	013
Light Trucks	Non-Fleet	Retail	021	022	023
g		Commercial	031	032	033
(0-10,000 lbs. GVW)	Flast	Service	014	015	016
	Fleet	Retail Commercial	024 034	025 035	026 036
		Commercial	034	035	
		Comilao	014	010	Zone Rated
	Non-Fleet	Service	211	212	213
Medium Trucks	NUITFIEEL	Retail	221	222	223
		Commercial	231	232	233
(10,001-20,000 lbs GVW)	Fleet	Service	214	215	216
	Fieel	Retail	224	225	226
		Commercial	234	235	236
		Service	311	312	313
	Non-Fleet	Retail	321	322	323
Heavy Trucks		Commercial	331	332	333
		Service	314	315	316
(20,001-45,000 lbs GVW)	Fleet	Retail	324	325	326
		Commercial	334	335	336
				1	
Extra-Heavy Trucks	Non-Fleet		401	402	403
(Over 45,000 lbs. GVW)	Fleet		404	405	406
		Service	341	342	343
Heavy	Non-Fleet	Retail	351	352	353
Truck-Tractors		Commercial	361	362	363
THUCK-TRACIOIS		Service	344	345	346
(0-45,000 lbs. GCW)	Fleet	Retail	354	355	356
, , , , , , , , , , , , , , , , , , ,		Commercial	364	365	366
	1	e eioi olui			
Extra-Heavy	Non-Fleet		501	502	503
Truck-Tractors (Over 45,000 lbs. GCW)	Fleet		504	505	506
		Semitrailers	671	672	673
		Trailers	681	682	683
Trailer	Non-Fleet	Service or			
Types		Utility Trailers	691	692	693
		Semitrailers	674	675	676
	Ele -t	Trailers	684	685	686
	Fleet	Service or Utility Trailers	694	695	696

CLASSIFICATION CODE

TRUCKS, TRACTORS, AND TRAILERS

Secondary Classification Code (Fourth, Fifth and Sixth positions)

Manufacturers: Automobiles used to transport raw materials and finished or unfinished goods manufactured, processed or constructed by the insured, except food manufacturers.			
Description	Definition	Code	
Chemical Manufacturers	Those insureds manufacturing flammable, explosive, corrosive or poisonous chemicals.	110	
Furniture Manufacturers	Those insureds manufacturing household or office furniture and heavy appliances such as refrigerators, stoves and televisions.	120	
Garment Manufacturers	Those insureds involved in the wholesale manufacturing of outer garments, such as dresses, coats and suits.	130	
Machinery Manufacturers	Those insureds manufacturing machinery used for industrial purposes.	140	
Metal Manufacturers	Those insureds manufacturing metal products for industrial or construction utilization, other than structural iron or steel.	150	
Structural Iron or Steel Manufacturers		160	
All Other Manufacturers Not Otherwise Classified		190	

Truckers: Automobiles used to haul or transport goods, materials or commodities for another, other than automobiles used in moving operations.			
Description	Definition	Code	
Common Carriers	Local, Intermediate and Long Distance	210	
Contract Carriers	Hauling Other Than Chemical, Iron and Steel or Petroleum (Local, Intermediate and Long Distance)	220	
Contract Carriers	Hauling Chemicals (Local, Intermediate and Long Distance)	230	
Contract Carriers	Hauling Iron and Steel (Local, Intermediate and Long Distance)	240	
Contract Carriers	Hauling Petroleum or Petroleum Products (Local, Intermediate and Long Distance)	270	
Exempt Carriers	Hauling Other Than Livestock (Local, Intermediate and Long Distance)	250	
Exempt Carriers	Hauling Livestock (Local, Intermediate and Long Distance)	260	
All Other Truckers Not Otherwise Classified	Local, Intermediate and Long Distance	290	

Last Revision Date: 01/01/2000

CLASSIFICATION CODE

TRUCKS, TRACTORS, AND TRAILERS

Secondary Classification Code (Fourth, Fifth and Sixth positions) (Continued)

Food Delivery: Automobiles used by food manufacturers to transport raw and finished pro in wholesale distribution of food.	oducts or used
Description	Code
Canneries and Packing Plants	310
Fish and Seafood	320
Frozen Food	330
Fruit and Vegetable	340
Meat or Poultry	350
All Other Food Delivery Not Otherwise Classified	390

Specialized Delivery: Automobiles used in deliveries subject to time and similar constraints.		
Description	Code	
Armored Cars	410	
Film Delivery	420	
Magazines or Newspapers	430	
Mail and Parcel Post	440	
All Other Specialized Delivery Not Otherwise Classified	490	

Waste Disposal: Automobiles transporting salvage and waste material for disposal or resale.		
Description	Code	
Automobile Dismantlers	510	
Building Wrecking Operators	520	
Garbage	530	
Junk Dealers	540	
All Other Waste Disposal Not Otherwise Classified	590	

Farmers: Automobiles owned by a farmer, used in connection with the operation of his own farm occasionally used to haul commodities for other farmers.		
Description	Code	
Individually Owned or Family Corporation (Hauling Other Than Livestock)	610	
Livestock Hauling	620	
All Other Farmers Not Otherwise Classified	690	

CLASSIFICATION CODE

TRUCKS, TRACTORS, AND TRAILERS

Secondary Classification Code (Fourth, Fifth and Sixth positions) (Continued)

Dump and Transit Mix Trucks and Trailers (Use these factors and codes only when no other secondary classification applies.)	
Description	Code
Excavating	710
Sand and Gravel (Other Than Quarrying)	720
Mining	730
Quarrying	740
All Other Dump and Transit Mix Trucks and Trailers Not Otherwise Classified	790

Contractors (Other Than Dump Trucks)	
Description	Code
Building – Commercial	810
Building – Private Dwellings	820
Electrical, Plumbing, Masonry, Plastering and Other Repair or Service	830
Excavating	840
Street and Road	850
All Other Contractor (Other Than Dump Trucks) Not Otherwise Classified	890

Not Otherwise Specified	
Description	Code
Logging and Lumbering	910
Petroleum Business - Automobiles used to transport petroleum and petroleum products such as gasoline and fuel oil.	920
All Other	990

CLASSIFICATION CODE

PRIVATE PASSENGER TYPES

Description	Code
Private Passenger Type vehicles used in business – Fleet	739800
Private Passenger Type vehicles used in business – Non-Fleet	739100

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CLASSIFICATION CODE

FLEET PUBLIC TRANSPORTATION

For Policy Effective Years 1993 and subsequent:

	Radius		
Description	Local Up to 50 Miles	Intermediate 51 to 200 Miles	Long Distance Over 200 Miles
Other Buses (except fourth position – see chart below)			Zone Rated
Airport Bus or Airport Limousine	528-00	529-00	520900
Inter-City Bus	538-00	539-00	530900
Charter Bus	548-00	549-00	540900
Sightseeing Bus	558-00	559-00	550900
Transport. of Athletes and Entertainers	568-00	569-00	560900
Social Services Automobile (Employee Operated)	648-00	649-00	640900
Social Services Automobile (All Other)	658-00	659-00	650900
Bus Not Otherwise Classified	588-00	589-00	580900
Urban Bus	518-00	519-00	

School and Church Buses (except fourth position – see chart below)			
School Bus owned by Political Subdivision or School District (Type of Risk Code 7)	618-00	619-00	610-00
Other School Bus	628-00	629-00	620-00
Church Bus	638-00	639-00	630-00

Taxicabs or Similar Passenger Carrying Service			
Driven Exclusively by Owner	418700	419700	410700
Rented or Leased to Others	418800	419800	410800
All Other	418900	419900	410900

Limousine	428900	429900	420900
Car Service	438900	439900	430900

Description: Fourth Position (School and Church Buses and Other Buses Excluding Zone Rated)		
Seating Capacity	Code	
1 to 8	1	
9 to 20	2	
21 to 60	3	
Over 60	4	

 \star

Fourth Position (Other Buses – Zone Rated Only)		
Description	Code	
Other Buses – Zone Rated	9	

CLASSIFICATION CODE

NON-FLEET PUBLIC TRANSPORTATION

For Policy Effective Years 1993 and subsequent:

	Radius		
Description	Local Up to 50 Miles	Intermediate 51 to 200 Miles	Long Distance Over 200 Miles
Other Buses (except fourth position – see chart below)		Zone Rated	
Airport Bus or Airport Limousine	525-00	526-00	527900
Inter-City Bus	535-00	536-00	537900
Charter Bus	545-00	546-00	547900
Sightseeing Bus	555-00	556-00	557900
Transport. Of Athletes and Entertainers	565-00	566-00	567900
Social Services Automobile (Employee-Operated)	645-00	646-00	647900
Social Services Automobile (All Other)	655-00	656-00	657900
Bus Not Otherwise Classified	585-00	586-00	587900
Urban Bus	515-00	516-00	

School and Church Buses (except fourth position – see chart below)					
School Bus owned by Political Subdivision or School District (Type of Risk Code 7)	615-00	616-00	617-00		
Other School Bus	625-00	626-00	627-00		
Church Bus 635-00 636-00 637-00					

Taxicabs or Similar Passenger Carrying Service			
Driven Exclusively by Owner	415700	416700	417700
Rented or Leased to Others	415800	416800	417800
All Other	415900	416900	417900

Limousines and Car Service			
Limousine	425900	426900	427900
Car Service	435900	436900	437900

Description: Fourth Position (School and Church Buses and Other Buses Excluding Zone Rated)		
Seating Capacity	Code	
1 to 8	1	
9 to 20	2	
21 to 60	3	
Over 60	4	

 \star

Fourth Position (Other Buses – Zone Rated Only)		
Description	Code	
Other Buses – Zone Rated	9	

Last Revision Date: 01/01/2004

Page: VI:15

Print Date: 09/13/2004

CLASSIFICATION CODE

PUBLIC TRANSPORTATION

MISCELLANEOUS

Description	Code
Transportation of Migrant Workers	
Passenger Hazard Included	592600
Passenger Hazard Excluded	592700

\star	Description	Code
	Transportation Network Services Use	
	• Coverage provided for drivers using their personal automobiles for ride-sharing, ride-hailing, on-demand delivery and other transportation network services	910000
	• Does not include automobiles classified as taxi, limousine or car service automobiles	
	Applies to voluntary business only	

CLASSIFICATION CODE

VAN POOLS

FLEET AND NON-FLEET

Description		Code
Definition Seating Capacity		Code
	1 to 8	411100
Employer Furnished	9 to 20	411200
	21 to 60	411300
	Over 60	411400
All Other	1 to 8	412100
	9 to 20	412200
	21 to 60	412300
	Over 60	412400

CLASSIFICATION CODE

SPECIAL TYPES

		Code	
Description	Definition	Liability	Physica Damage
Ambulance Services	Emergency	791300	791300
	Non-Emergency	791400	791400
Antique Motor Vehicles	Including Motorcycles	962000	962000
Auto Body Manufacturers and Installers		792400	792400
Bobtail Operations		748900	
Business Interruption			798700
Driver Training Programs	Educational Institutions	792600	792600
	Commercial Driving Schools	792700	792700
Farmers Special Plates		795300	795300
Fire Departments	Private Passenger Types	790800	790800
	All Other Types	790900	790900
Funeral Directors	Limousines	791500	791500
	Hearses and Flower Cars	792200	792200
Golfmobiles		946000	946000
Law Enforcement Agencies	Private Passenger Types	791100	791100
Ū	Motorcycles	794200	794200
	All Other Types	791200	791200
Long Term Leasing or Rental Concerns	Contingent Coverage	721900	721900
Short Term Leasing or Rental	Trucks	721100	721100
Concerns	Tractors	721200	721200
	Trailers, Semitrailers and Trailers Used with Private Passenger Autos	721300	721300
	Private Passenger Autos	721400	721400
	Motor Homes	721500	721500
	Miscellaneous Types	721600	721600
Mobile Homes	Trailers Equipped as Living Quarters	796300	796300
	Pick-ups Used Solely to Transport Camper Bodies	796200	796200
	Motor Homes not more than 22 feet in length	796000	796000
	Motor Homes more than 22 feet in length	796100	796100
Special or Mobile Equipment			
Vehicles Subject to the	Capable of moving on own power	793400	793400
Compulsory Law	Not capable of moving on own power	793900	793900
Vehicles Not Subject to the Compulsory Law	Municipally owned or DPU	796500	796500
All Other Mobile Equipment		790600	790600
Farm Equipment		790700	790700
Repossessed Automobiles		792500	792500
Snowmobiles		796400	796400
Owner-Contractor		070700	
Transporters		070600	
Trailers and Semitrailers	Used as Showrooms or Salesrooms	045200	045200
Trailer Plate – Boat Dealers		045600	
All Other Types not described above		704000	704000

CLASSIFICATION CODE

★ SPECIAL TYPES (Continued)

- As of January 1, 2004, changes in the Garage Policy resulted in the Garage Policy Forms being available for Dealer Operations only. Since a company may elect not to adopt the modified Garage Policy, Repair Shops, Service Stations and Storage Garages and Public Parking Places classification codes are now listed in both the Garage and Special Types Classification Code tables, with the same classification codes. Note that if a company has elected not to adopt the modified Garage Policy, the Repair Shops, Service Stations and Storage Garages and Public Parking Places will continue to be written on a Garage Policy. If the modifications have been adopted, these classes should be classified as Special Types and written on the Business Auto Coverage Form.
- Those companies that have elected to adopt the revised Garage Policy writing program may report their statistical data using the revised reporting requirements on an optional basis for policies effective January 1, 2004 June 30, 2004 and on a mandatory basis for policies effective July 1, 2004 and subsequent.

	Liability and Physical Damage		
Description	Unlimited Customer Coverage	Liability Exposure Basis	
Repair Shops – Risks primarily engaged in the repair of automobiles, including body, fender, radiator, ignition service and paint shops	780900	plate	
Service Stations – Risks primarily engaged in the servicing of automobiles (including car washes) and the sale and installation of automobile accessories excluding major engine or body repair work	781100	plate	
Storage Garages and Public Parking Places – Risks primarily engaged in the storing or parking of automobiles	781300	plate	

CLASSIFICATION CODE

COMMERCIAL MOTORCYCLE DEFINITION

- Motorcycles (including Motorbikes)
- Motorscooters (including Scootmobiles, Safticycles, Motorglides)
- Motorbikes
- Similar Motor Vehicles used for Commercial purposes

	Description	Code	
	Rating Group Cubic Centimeter Engine Displacement		
★	Electric	N/A	924000
	Group A	C.C. Displacement to 70	924100
		C.C. Displacement 71 – 100	924200
	Group B C.C. Displacement 101 – 125		924300
		C.C. Displacement 126 – 200	924400
		C.C. Displacement 201 – 275	924500
		C.C. Displacement 276 – 350	924600
	Group C	C.C. Displacement 351 – 500	924700
		C.C. Displacement 501 – 650	924800
	Group D	C.C. Displacement over 650	924900

CLASSIFICATION CODE

GARAGES

RISKS SUBJECT TO THE MASSACHUSETTS COMPULSORY LAW

• Garages, Garage Dealers, Service Stations, Repair Shops and Parking Facilities

★

- As of January 1, 2004, changes in the Garage Policy resulted in the Garage Policy Forms being available for Dealer Operations
 only. Since a company may elect not to adopt the modified Garage Policy, Repair Shops, Service Stations and Storage Garages and
 Public Parking Places classification codes are now listed in both the Garage and Special Types Classification Code tables, with the
 same classification codes. Note that if a company has elected not to adopt the modified Garage Policy, the Repair Shops, Service
 Stations and Storage Garages and Public Parking Places will continue to be written on a Garage Policy. If the modifications have
 been adopted, these classes should be classified as Special Types and written on the Business Auto Coverage Form.
- Those companies that have elected to adopt the revised Garage Policy writing program may report their statistical data using the revised reporting requirements on an optional basis for policies effective January 1, 2004 June 30, 2004 and on a mandatory basis for policies effective July 1, 2004 and subsequent.
- Note that CAR has adopted the revised Garage Policy as of July 1, 2004. Therefore, as of this date, the Repair Shops, Service Stations and Storage Garages and Public Parking Places classifications listed on a Limited Customer Coverage Basis (780800, 781000 and 781200) will no longer be available for ceded policies.

Description	Liability and Physical Damage			
	Limited Customer Coverage	Unlimited Customer Coverage	Liability Exposure Basis	
Franchised Private Passenger Automobile Dealer (with or without any other type of franchise)	730100	730200	plate	
Franchised Truck or Truck-Tractor Dealer (with or without any other type of franchise except private passenger automobile franchise)	731100	731200	plate	
Franchised Motorcycle Dealer including all two-wheeled cycle vehicles (no private passenger or truck franchise)	732100	732200	plate	
Franchised Recreational Vehicle Dealer (no private passenger, snowmobile or residence types mobile home)	733100	733200	plate	
Franchised Residence Type Mobile Home Trailer Dealer	782000	782100	plate	
Franchised Commercial Trailer Dealer	783000	783100	plate	
Other Franchised Self-Propelled Land Motor Vehicle Dealer (including motor homes and campers)	734100	734200	plate	
Non-Franchised Dealer (any of the risks described above that are not franchised dealers)	735100	735200	plate	
Equipment and Implement Dealer (no other franchise)	736100	736200	plate	
Repair Shops – Risks primarily engaged in the repair of automobiles, including body, fender, radiator, ignition service and paint shops	780800	780900	plate	
Service Stations – Risks primarily engaged in the servicing of automobiles (including car washes) and the sale and installation of automobile accessories excluding major engine or body repair work	781000	781100	plate	
Storage Garages and Public Parking Places – Risks primarily engaged in the storing or parking of automobiles	781200	781300	plate	
Trailer Plate – Garages (Liability only)	070800	070900	plate	
Premises Coverage – Clerical (Liability only)	070400	070400	payroll	
Premises Coverage – All Other (Liability Only)	070500	070500	payroll	
Other Than Covered Auto (Liability Only) Applicable to those Policies Written on the Simplified Garage Policy	070500	070500	payroll	

Last Revision Date: 01/01/2004

Page: VI:21

Print Date: 04/13/2004

CLASSIFICATION CODE

GARAGES

RISKS NOT SUBJECT TO THE MASSACHUSETTS COMPULSORY LAW

- Garages, Garage Dealers, Service Stations, Repair Shops and Parking Facilities
- ★ The following classifications are only applicable if a company has not adopted the revised Garage Policy writing program which became available January 1, 2004 and subsequent. Under this program, Repair Shops, Service Stations, Storage Garages and Public Parking Places do not qualify for the Garage Policy Form and the classification codes listed below are no longer classified as Garage classifications.
 - Note that CAR has adopted the revised Garage Policy as of July 1, 2004. Therefore, as of this date, the classifications listed below will no longer be available for ceded policies.

Description		Code	
		Physical Damage	
Repair Shops, Storage Garages, Service Stations and Public Parking Places	075000	075000	
 All Other Risks Not Subject to the Massachusetts Compulsory Law As written in accordance with the garage section of the Massachusetts Commercial Automobile Insurance Manual 	707000	707000	

 \star

CLASSIFICATION CODE

NON-OWNED AUTOMOBILES

Description		ode		
		Physical Damage		
Non-Ownership Liability (Exposure Basis: Employee Months)				
Risks with 0 – 25 Employees	660100			
Risks with 26 – 100 Employees	660200			
Risks with 101 – 500 Employees	660300			
Risks with 501 – 1,000 Employees	660400			
Risks with over 1,000 Employees	660500			
Individual Liability of Employees (including Social Service Agency Risks)	667100			
Non-Ownership Liability (Exposure Basis: Volunteer Months)				
Volunteers (Social Service Agency Risks Only)	667000			
Individual Liability of Volunteers (Social Service Agency Risks Only)	667200			
Hired Automobiles (Exposure Basis: Cost of Hire)				
Private Passenger and Commercial Vehicles (excluding Truckers)	661100	661100		
Truckers	661300	661300		
Truckers – Without Hold Harmless Agreements (Voluntary Business Only)	662600	662600		
Truckers – With Hold Harmless Agreements (Voluntary Business Only)	662800	662800		
Public Transportation Automobiles	500000	500000		
On a Minimum or an "If Any" Premium Basis	661900			
Other Non-Owned Automobiles				
Drive Other Car Coverage	902000	902000		
Partnership as the Named Insured – Non-Ownership Liability	700000			
All Other	700000	700000		

CLASSIFICATION CODE

SPECIAL RATING AND ADJUSTMENT

Description		Code		
		Physical Damage		
Composite Rated Risks	999000	999000		
Non Cedable Limits	800000			
Legal Liability for Physical Damage to Trailers under a Trailer Interchange Agreement		993200		
Retrospective Rating Plan D Adjustments (Premium Only)				
Private Passenger	998100	998100		
Commercial	998200	998200		
Publics	998500	998500		
Garages	998700	998700		
All Other	998900	998900		
All Other	998000	998000		
Gross Receipts and Mileage				
Gross Receipts		1		
Buses	059900	059900		
Commercial	089900	089900		
Mileage		•		
Buses	059900	059900		
Commercial	089800	089800		

ZONE RATING CODE

The Zone Rating Code applies to the following classifications:

- Trucks, Tractors and Trailers, except for light trucks and trailers used with light trucks, regularly operated beyond a 200 mile radius from the street address of principal garaging
- Public Automobiles, except for Taxis, Limousines, School, Church and Urban Buses and Van Pools, regularly operated beyond a 200 mile radius from the street address of principal garaging

Refer to the Massachusetts Commercial Automobile Insurance Manual Zone Rating Tables for the definitions of the applicable codes. The Zone Rating Code is developed from the last three positions of the Zone Combination Code. The following is a table of valid codes derived from the rating tables:

Region	Zone	Zone 03 Boston	Zone 49 All Other		Region	Zone	Zone 03 Boston	Zone 49 All Other
		Code	Code				Code	Code
Atlanta	01	201	901		New Orleans	25	225	925
Balt./Wash.	02	202	902		New York City	26	226	926
Boston	03	203	903		Oklahoma City	27	227	927
Buffalo	04	204	904		Omaha	28	228	928
Charlotte	05	205	905		Phoenix	29	229	929
Chicago	06	206	906		Philadelphia	30	230	930
Cincinnati	07	207	907		Pittsburgh	31	231	931
Cleveland	08	208	908		Portland	32	232	932
Dallas Ft Worth	09	209	909		Richmond	33	233	933
Denver	10	210	910		St. Louis	34	234	934
Detroit	11	211	911		Salt Lake City	35	235	935
Hartford	12	212	912		San Francisco	36	236	936
Houston	13	213	913		Tulsa	37	237	937
Indianapolis	14	214	914		Pacific	40	240	940
Jacksonville	15	215	915		Mountain	41	241	941
Kansas City	16	216	916		Midwest	42	242	942
Little Rock	17	217	917		Southwest	43	243	943
Los Angeles	18	218	918		North Central	44	244	944
Louisville	19	219	919		Mid East	45	245	945
Memphis	20	220	920		Gulf	46	246	946
Miami	21	221	921		South East	47	247	947
Milwaukee	22	222	922	1	Eastern	48	248	948
Minn./St. Paul	23	223	923		New England	49	249	949
Nashville	24	224	924		<u></u>			

AGE CODE

The Age Code applies to the following classifications:

- Publics
- Private Passenger Types
- Trucks, Tractors and Trailers
- Van Pools

★

• Special Types (refer to Appendix A – Classification Code Decision Table for applicable classifications)

For purposes of the Age definition, the current model year shall change effective October 1 of each calendar year. The applicable codes are as follows:

Description	Age Group	Code
Automobiles of the Current Model Year	1	1
Automobiles of the First Preceding Model Year	2	2
Automobiles of the Second Preceding Model Year	3	3
Automobiles of the Third Preceding Model Year	4	4
Automobiles of the Fourth Preceding Model Year	5	5
Automobiles of the Fifth Preceding Model Year	6	6
Automobiles of the Sixth Preceding Model Year	7	7
Automobiles of the Seventh Preceding Model Year	8	8
Automobiles of Model Years 1981 through the Eighth Preceding Model Year	9	9
Automobiles of Model Years 1980 and prior	0	0

CLASS GROUP CODE

For Policy Effective Years 1990 and prior:

• For voluntary business, companies may optionally use Class Group Code 3 to identify that the class is other than commercial business

Description	Code
Voluntary	0
Ceded Commercial Fleet CAR Rated Risk Trucks, Tractors and Trailers – Fleet Private Passenger Types – Fleet 	2
Ceded All Other Commercial	3

★ For Policy Effective Years 1991 through 2002:

Description	Code
Voluntary	0
Ceded Commercial – CAR Rate Used	2
 Ceded Commercial – CAR Rate Not Used Non-Fleet Private Passenger Types Only (Class Code 739100) 	3

PARTIAL/TOTAL LOSS INDICATOR

- This field applies to Property Damage Liability and Physical Damage Losses only
- Non-vehicle claims should be coded as a partial loss (Partial/Total Loss Indicator 1)
- For additional information regarding reporting the extent of vehicle loss, refer to Section B Losses of the General Reporting Requirements Section of this Plan

Description	Code
Partial Loss	1
Total Loss	2

PASSIVE RESTRAINT DEVICE DISCOUNT CODE

• This discount applies to Medical Payments, Uninsured and Underinsured Liability and PIP (No-Fault) coverages only

Description	Code
No Discount	0
 Category I Applies Vehicle contains occupant safety features approved by the Massachusetts Division of Insurance 	1

RATING IDENTIFICATION CODE

	Description	Code
\star	Experience Rated	1
\star	Both Experience Rated and All Other Rated	7
\star	All Other Rated	9
*	 Not Experience Rated, Not All Other Rated Optional for policies effective 1/1/2003 – 12/31/2003. Mandatory for policies effective 1/1/2004 and subsequent. 	0

TERRORISM COVERAGE CODE

Terrorism Coverage Code may be optionally reported for policies effective July 1, 2006 – December 31, 2006. It is mandatory to report Terrorism Coverage Code for policies effective January 1, 2007 and subsequent.

Terrorism Coverage Code must be reported on all premium records. This includes both underlying policy premium records as well as the separate terrorism coverage records.

Description	Code
Underlying Policy Record	
Exclusion for Terrorism for coverage in excess of the minimum statutory policy limits as provided in the Commercial Automobile Policy	A
Terrorism Coverage Provided on the Underlying Policy (total policy limit) at No Additional Charge	
Coverage only for terrorism events resulting in up to \$25 million in property damage	В
All Other Terrorism Coverage	С
Terrorism Coverage Provided on the Underlying Policy at an Additional Charge (Separate premium record for developed terrorism coverage premium must also be reported – see below)	Н
Terrorism Coverage Record	
Report separately developed premium for terrorism coverage	Т

Last Revision Date: 01/01/2008

*

PRODUCER CODE

- Producer Code is a six position alphanumeric code
- Producer Code should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- Note that a unique Producer Code is required to be reported for each agency office location.

Producer Code	Code
A1234	A1234 <i>b</i>
987	987 <i>bbb</i>
AB5678	AB5678

ZIP CODE

- ZIP Code is a nine position numeric code
- It is mandatory to report the first five positions of the ZIP Code
- The ZIP Code extension (occupying the last four positions) is optional
- ZIP Code should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)

ZIP Code	Code
01463-8735	014638735
01463	01463 <i>bbbb</i>
02135-9822	021359822

EXPOSURE

1. Per Car Basis

Report the exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table on the next page.

2. Per Plate Basis

For Garages Subject to the Compulsory Law, report the exposure as the number of plate months. A plate month is equivalent to one plate insured for one month. Refer to the Exposure table on the next page.

	Example	of per Plate Basis	
Plates	Months	Result (Plates x Months)	Code
21	12	252	0000252
100	12	1200	0001200

3. Per Payroll and Earnings Basis

For Garage Premises and Garages Not Subject to the Compulsory Law, and in all cases where the manual rates apply to each \$100 of payroll or earnings, the exposure is the estimated payroll or earnings at the inception of the policy. For coverages written on a payroll or earnings basis, the exposure shall be rounded to the nearest hundred dollars and shall be reported in units of one hundred. If the final audit after expiration of the policy develops additional payroll or earnings, such additional payroll or earnings over and above the estimated payroll or earnings must be reported on an additional record. If the audited payroll or earnings is less than the estimated, the difference is to be reported as a credit entry. On all records reporting adjustments after audit, report the original policy effective and expiration dates.

	Example of Payroll and	Earnings Basis		
Payroll or Earnings				
\$10,711	\$10,700	\$107	0000107	
\$250,295	\$250,300	\$2,503	0002503	

4. Per Gross Receipts, Mileage and Cost of Hire Classes

The same basis of reporting applies as outlined in Payroll and Earnings Basis (3) above. Gross Receipts and Cost of Hire shall be rounded to the nearest hundred dollars and reported in units of one hundred. Mileage shall be rounded to the nearest hundred in units of one hundred.

5. Per Employee Month Basis

The employee month exposure to be reported under Non-Ownership Liability is to be reported on an employee month basis. An employee month is equivalent to one employee insured for one month.

	Examp	le of Employee Basis	
Employees	Employees Months (Employees x Months) Code		Code
20	12	240	0000240
155	12	1860	0001860

6. Limit of Insurance (Business Interruption Coverage Only)

Report the exposure as the limit of insurance written on the endorsement schedule. If each item of scheduled property has a separate limit of insurance, an individual premium record is required to be reported for each item. If a single limit of insurance applies to all scheduled property, one single premium record is required.

Example of Limit of Ins	urance		
Limit of Insurance (from Schedule)	Limit of Insurance (from Schedule) Code		
\$10,000	0010000		
\$50,000	0050000		

EXPOSURE

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						5	3

The exposue for a car tauget of two years is A. The exposure for a car cancelled effective between July 16 and August 15 on a policy expiring between April 16 and May 15 of the following year is 9.

EXPERIENCE RATING MODIFICATION FACTOR CODE

- The Experience Rating Modification Factor Code is a three digit code reflecting the decimal complement of Experience Rating modifications (excluding retrospective adjustments which must be reported under the specific classification codes provided for such adjustments)
- The factor shall be rounded to two decimal places for reporting
- If no modification exists, report Experience Rating Modification Factor Code 100

Experience Rating Modification Factor	Decimal Complement	Code
None	None	100
-10% (Credit)	0.90	090
+15% (Debit)	1.15	115

ALL OTHER RATING MODIFICATION FACTOR CODE

- The All Other Rating Modification Factor Code is a three digit code reflecting the decimal complement of the combined effect on voluntarily reported premium of:
 - Schedule Rating Modifications
 - Individual Risk Modifications or similar Modifications
 - Expense Modifications or similar Modifications
- This modification is calculated for voluntary business only
- The factor shall be rounded to two decimal places for reporting
- If no modification exists, report All Other Rating Modification Factor Code 100

Examples:

Schedule Rating Modification	Individual Risk Modification	Expense Modification	Total Rating Modification	Code
None	None	None	None	100
None	+10% (credit)	None	0.900*	090
+10% (debit)	+15% (debit)	None	1.265*	127
-15% (credit)	None	-10% (credit)	0.765*	077
-15% (credit)	+15% (debit)	None	0.977*	100

* These examples are calculated on a multiplicative basis and are illustrative of the required reporting technique only. The Total Rating Modification can be determined using other methodologies.

CLAIM IDENTIFICATION NUMBER

- Claim Identification Number is a sixteen position alphanumeric code
- It is mandatory to report at least three characters
- Claim ID should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)

Claim Identification Number	Code Reported
CL014638735	CL014638735bbbbb
123456789	123456789 <i>bbbbbbb</i>
ABCDEF1234567890	ABCDEF1234567890

POLICY IDENTIFICATION NUMBER

- Policy Identification Number is a sixteen position alphanumeric code
- It is mandatory to report at least three characters
- Policy ID should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)

Policy Identification Number	Code Reported
PL014638735	PL014638735bbbbb
123456789	123456789 <i>bbbbbbb</i>
ABCDEF1234567890	ABCDEF1234567890

VEHICLE IDENTIFICATION NUMBER

- Vehicle Identification Number (VIN) is a five to seventeen position alphanumeric code
- VIN should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- For Losses: If a claim is incurred on an insured's policy, that does not involve a vehicle named on said policy, the losses may be coded as 97 followed by fifteen zeros (9700000000000000)

Vehicle Identification Number	Code Reported
1FABP28A6FF143890	1FABP28A6FF143890
1C3BH41J6MN109186	1C3BH41J6MN109186
ZC2FP1101KB202230	ZC2FP1101KB202230
GV5VK3212B	GV5VK3212Bbbbbbbbb
MA12345	MA12345bbbbbbbbbbb

Liability Only

This section applies to liability records only

LIMITS IDENTIFIER CODE

Description	Code
 Combined Single Limit Liability policies Separate premiums for Bodily Injury and Property Damage * 	2
Split Limit Liability policiesSeparate premiums for Bodily Injury and Property Damage	3

* For single limit liability policies the reported Bodily Injury premium must be based on the Bodily Injury portion of the single limit calculation (including Uninsured Motorist, Underinsured Motorist and Medical Payments premiums if applicable). The reported Property Damage premium must be based on the Property Damage portion of the single limit calculation.

AGGREGATE LIMITS IDENTIFIER CODE

- The Aggregate Limits Identifier Code applies to Garage Premises coverage only
- These policies are written with a Combined Single Limit of Liability coverage

Aggregate Limits	Code
One times the Per Accident Limit of Liability	1
Two times the Per Accident Limit of Liability	2
Three times the Per Accident Limit of Liability	3
Five times the Per Accident Limit of Liability	5
Seven times the Per Accident Limit of Liability	7
All Other Aggregate Limits of Liability	9

LIABILITY LIMITS CODE

BODILY INJURY		
Limits of Liability		Code
Per Claim	Per Accident	Code
\$ 20,000	\$ 40,000	01
20,000	40,000	04 *
20,000	50,000	11
25,000	60,000	05
25,000	50,000	06
30,000	70,000	12
35,000	80,000	13
50,000	100,000	07
100,000	300,000	08
250,000	500,000	09
500,000	500,000	15 #
500,000	1,000,000	10
1,000,000	1,000,000	14
All Other Limits No	ot Above	49
No Bodily Injury		00

UNINSURED MOTORIST		
Limits of Liability		Code
Per Claim	Per Accident	Code
\$ 20,000	\$ 40,000	04
20,000	50,000	11
25,000	60,000	05
25,000	50,000	06
30,000	70,000	12
35,000	80,000	13
50,000	100,000	07
100,000	300,000	08
250,000	500,000	09
500,000	500,000	15 #
500,000	1,000,000	10 ***
1,000,000	1,000,000	14 ***
All Other Limits N		49
No Uninsured Aut	0	00

PROPERTY DAMAGE		
Limits of Liability	Code	
\$ 5,000	01	
10,000	02	
15,000	03	
25,000	04	
35,000	05	
50,000	06	
100,000	07	
250,000	11	
500,000	10	
750,000	12 ***	
1,000,000	13 ***	
Property Damage Deductible	08	
All Other Limits Not Above	09	
No Property Damage	00	

MEDICAL PAYMENTS	
Limits of Liability	Code
\$ 500	01
750	02
1,000	03
2,000	04
5,000	05
10,000	06
15,000	07
20,000	08
25,000	09
50,000	10 ***
100,000	11 ***
All Other Limits Not Above	49 ****
No Medical Payments	00

UNDERINSURED MOTORIST		
Limits of Liability		Code
Per Claim	Per Accident	Code
\$ 20,000	\$ 40,000	04 **
20,000	50,000	11
25,000	60,000	05
25,000	50,000	06
30,000	70,000	12
35,000	80,000	13
50,000	100,000	07
100,000	300,000	08
250,000	500,000	09
500,000	500,000	15 #
500,000	1,000,000	10 ***
1,000,000	1,000,000	14 ***
All Other Limits No		49
No Underinsured	Auto	00

- * If both mandatory (code 01) and optional (code 04) Bodily Injury coverage are purchased, Limits Code 04 must be reported.
- ** If the 20/40 limit of Underinsured Motorists coverage is purchased, although there is no associated cost, Limits Code 04 must be reported.
- *** This limit is available for voluntary business only.
- **** Optional for policies effective 1/1/05 12/31/05 and mandatory for policies effective 1/1/06 and subsequent.
- ★ # Mandatory for policies effective January 1, 2008 and subsequent.

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Last Revision Date: 01/01/2008

LIABILITY LIMITS CODE (Continued)

• If a policy is written at a per occurrence limit that is not identified by a specific code, the transaction shall be coded to the next higher per occurrence limit.

COMBINED SINGLE LIMIT		
Limits of Liability Per Occurrence	Code	
\$ 45,000	04	
50,000	08	
75,000	09	
100,000	10	
150,000	11	
200,000	12	
250,000	13	
300,000	14	
400,000	15	
500,000	16	
750,000	17	
1,000,000	18	
1,500,000	19	
2,000,000	20	
2,500,000	21	
3,000,000	22	
5,000,000	23	
7,500,000	24	
10,000,000	25	
15,000,000	26	
20,000,000	27	
30,000,000	28	
50,000,000	29	

POLLUTION LIABILITY BROADENED COVERAGE CODE

• This coverage is available only in conjunction with the Commercial Simplified Automobile Program.

Description	Code
No Pollution Liability Broadened Coverage	0
 Pollution Liability Broadened Coverage – Hazardous As defined in the Massachusetts Commercial Automobile Insurance Manual in Section II.46.C.3 	1
Pollution Liability Broadened Coverage – Non-Hazardous	2
 Pollution Liability Broadened Coverage – Extra Hazardous As defined in the Massachusetts Commercial Automobile Insurance Manual in Section II.46.C.2 or Section II.46.C.4 	3

TYPE OF LOSS CODE - LIABILITY

Description	Code
Bodily Injury to Others – Excluding claims covered under Type of Loss Code 02	01
Bodily Injury to Others – Guest claims, claims arising out of accidents occurring off the ways of the Commonwealth or claims out of Massachusetts	02
Damage to Someone Else's Property (Property Damage Liability)	03
Medical Payments	05
Bodily Injury Caused by an Uninsured Automobile	06
Bodily Injury Caused by an Underinsured Automobile	07
Pollution Liability – Bodily Injury	09
Pollution Liability – Property Damage	10
Bodily Injury to Others – Inter or Intra Company Reimbursements resulting from PIP (No-Fault) claims (excluding claims covered under Type of Loss Code 14)	11
Bodily Injury to Others – Inter or Intra Company Reimbursements resulting from PIP (No-Fault) claims arising out of accidents occurring off the ways of the Commonwealth or claims out of Massachusetts	14
 Bodily Injury Loss Due to Acts of Terrorism Includes Bodily Injury Caused by an Uninsured Automobile, Bodily Injury Caused by an Underinsured Automobile and Medical Payments 	97
Property Damage Loss Due to Acts of Terrorism	98

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No-Fault Only

This section applies to no-fault records only

PIP COVERAGE CODE

Description	Code
Basic PIP (No-Fault) Coverage Only	1
PIP Coverage – Employers Subject to Massachusetts Workers' Compensation Act	2



TYPE OF LOSS CODE – PIP (NO-FAULT)

Description	Code
Non-Split Outstanding Loss	23
Medical Loss	24
Wage Loss	34
Other Economic Loss	44
Subrogation Recovery	45
No-Fault Loss Due to Acts of Terrorism	97

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Physical Damage Only

This section applies to physical damage records only

OTHER THAN COLLISION COVERAGE CODE

★ The \$100 Towing and Labor Costs Coverage codes are optional for policies effective 9/4/2002 – 12/31/2002 and mandatory for policies effective 1/1/2003 and subsequent.

OTC Coverage with Full Glass Coverage				
	Code			
Description	Towing and Labor Cost Coverage			
	\$25 Included	\$50 Included	★ \$100 Included	Excluded
Comprehensive Coverage				
• \$ 300 Deductible	034	234	434	035
• \$ 500 Deductible	036	236	436	037
• \$1,000 Deductible	038	238	438	039
\$2,000 Deductible	022	222	422	023
All Other Deductibles with Full Glass Coverage	064	264	464	004
Fire only Coverage	065	265	465	005
Fire and Theft Coverage	066	266	466	006
Fire, Theft and Combined Additional Coverage with MMV or Dealers Supplemental Coverage with MMV	068	268	468	008
Fire, Theft and Combined Additional Coverage without MMV or Dealers Supplemental Coverage without MMV	069	269	469	009
Stated Amount	060			
Agreed Amount	063			

OTC Coverage with Optional \$100 Glass Deductible				
	Code			
Description	Towing and Labor Cost Coverage			
	\$25 Included	\$50 Included	★ \$100 Included	Excluded
Comprehensive Coverage				
• \$ 300 Deductible	134	334	534	135
• \$ 500 Deductible	136	336	536	137
• \$1,000 Deductible	138	338	538	139
• \$2,000 Deductible	122	322	522	123
All Other Deductibles with Optional Glass Deductible	164	364	564	104
Fire only Coverage	165	365	565	105
Fire and Theft Coverage	166	366	566	106
Fire, Theft and Combined Additional Coverage with MMV or Dealers Supplemental Coverage with MMV	168	368	568	108
Fire, Theft and Combined Additional Coverage without MMV or Dealers Supplemental Coverage without MMV	169	369	569	109

Last Revision Date: 01/01/2003

Page: VI:49

Print Date: 04/13/2004

OTHER THAN COLLISION COVERAGE CODE (Continued)

MISCELLANEOUS COVERAGES

Description	Code
Trailer Interchange Legal Liability (Class Code 993200)	050
Single Interest – Fire and Theft (Class Code 998000)	051
Single Interest – Conversion, Embezzlement or Secretion (Class Code 998000)	052
Dealers Wholesale Floor Plan (Class Code 998000)	054
Composite Rated Risks (Class Code 999000)	059
 Towing and Labor Cost – \$100 per disablement No other Comprehensive coverage afforded Optional for policies effective 9/4/2002 – 12/31/2002. Mandatory for policies effective 1/1/2003 and subsequent. 	080
Towing and Labor Cost – \$25 per disablement No other Comprehensive coverage afforded 	081
Towing and Labor Cost – \$50 per disablement No other Comprehensive coverage afforded 	082
Rental Reimbursement	083
Automobile Dealers False Pretense Coverage	084
Sound Receiving and Transmitting Equipment (excluding Police vehicles, Fire vehicles, and Garagekeepers)	087
Retrospective Rating Plan D premium adjustment only (Report Retrospective Rating Plan D premium, other than adjustments, with applicable class and coverage)	089
All Other Coverages – excluding Collision	089

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Miscellaneous Coverages - Other	Code
Business Interruption Coverage (Class Code 798700)	401

OTHER THAN COLLISION COVERAGE CODE (Continued)

GARAGE COVERAGE

Garage Dealers - Comprehensive Coverage	Code
\$ 300 Deductible per car / \$1,500 per occurrence	202
\$ 500 Deductible per car / \$2,500 per occurrence	203
\$1,000 Deductible per car / \$5,000 per occurrence	204

Garagekeepers - Comprehensive Coverage	Code
Legal Liability Basis	211
Direct Coverage – Primary	212
Direct Coverage – Excess	213

\star	Garagekeepers - Specified Causes of Loss Coverage (Fire, Theft and Vandalism)	Code
	Legal Liability Basis	214
	Direct Coverage – Primary	215
	Direct Coverage – Excess	216

	Garagekeepers - Miscellaneous Coverages	Code
\star	Audio, Visual and Data Electronic Equipment	217

COLLISION COVERAGE CODE

Collision Coverage Without Waiver of Deductible			
Description	Code	Type of Loss Code	
\$ 300 Deductible	076	10	
\$ 500 Deductible	077	10	
\$1,000 Deductible	078	10	
\$2,000 Deductible	072	10	
All Other Deductibles	079	10	

Collision Coverage With Waiver of Deductible			
Description	Code	Type of Loss Code	
\$ 300 Deductible	015	11 or 12	
\$ 500 Deductible	016	11 or 12	
\$1,000 Deductible	017	11 or 12	
\$2,000 Deductible	012	11 or 12	
All Other Deductibles	019	11 or 12	

Limited Collision Coverage			
Description	Code	Type of Loss Code	
Full Coverage	040	12	
\$ 300 Deductible	045	10	
\$ 500 Deductible	042	10	
\$1,000 Deductible	043	10	
\$2,000 Deductible	046	10	
All Other Deductibles	049	10	

COLLISION COVERAGE CODE (Continued)

MISCELLANEOUS COVERAGES

Description	Code
Stated Amount – Limited Collision	041
Trailer Interchange Legal Liability (Class Code 993200)	090
Single Interest Collision (Class Code 998000)	091
Stated Amount – Collision	092
Composite Rated Risks (Class Code 999000)	093
Dealers Wholesale Floor Plan (Class Code 998000)	094
Agreed Amount – Collision	095
Retrospective Rating Plan D premium adjustment only (Report Retrospective Rating Plan D premium, other than adjustments, with applicable class and coverage)	099
All Other	099

Miscellaneous Coverages - Other	Code
Business Interruption Coverage (Class Code 798700)	411

GARAGE COVERAGE

Garagekeepers - Collision Coverage	Code
Legal Liability Basis	311
Direct Coverage – Primary	312
Direct Coverage – Excess	313

Garage Dealers - Drive-Away Collision Coverage	Code
\$300 Deductible	477
\$500 Deductible	478
All Other	099

	Garagekeepers – Miscellaneous Coverages	Code
\star	Audio, Visual and Data Electronic Equipment	317

Last Revision Date: 01/01/2018

Page: VI:53

Print Date: 12/07/2017

SYMBOL CODE

ORIGINAL COST NEW of COMMERCIAL VEHICLES

★ The Symbol Code (Original Cost New) applies to the following classifications:

- Trucks, Tractors, and Trailers
- Private Passenger Types
- Publics

*

- Van Pools
- Special Types (refer to Appendix A Classification Code Decision Table for applicable classifications)

For those vehicles with Original Cost New valued at \$90,001 and over (Symbol Code 12), companies are required to report the vehicle's Original Cost New in the Original Cost New Code field of the physical damage premium and loss record layouts.

Cost New	Code
\$ 0-4,500	01
4,501 - 6,000	02
6,001 - 8,000	03
8,001 – 10,000	04
10,001 – 15,000	05
15,001 – 20,000	06
20,001 – 25,000	07
25,001 - 40,000	08
40,001 - 65,000	10
65,001 - 90,000	11
90,001 and over	12

SYMBOL CODE (Continued)

VEHICLE VALUE for COMMERCIAL MOTORCYCLES

• Motorcycles (including Motorbikes), Motorscooters (including Scootmobiles, Safticycles, Motorglides), Mopeds and similar Motor Vehicles

Value	Code	Value	Code	Value	Code
\$ 100	01	\$ 3,500	35	\$ 6,900	69
200	02	3,600	36	7,000	70
300	03	3,700	37	7,100	71
400	04	3,800	38	7,200	72
500	05	3,900	39	7,300	73
600	06	4,000	40	7,400	74
700	07	4,100	41	7,500	75
800	08	4,200	42	7,600	76
900	09	4,300	43	7,700	77
1,000	10	4,400	44	7,800	78
1,100	11	4,500	45	7,900	79
1,200	12	4,600	46	8,000	80
1,300	13	4,700	47	8,100	81
1,400	14	4,800	48	8,200	82
1,500	15	4,900	49	8,300	83
1,600	16	5,000	50	8,400	84
1,700	17	5,100	51	8,500	85
1,800	18	5,200	52	8,600	86
1,900	19	5,300	53	8,700	87
2,000	20	5,400	54	8,800	88
2,100	21	5,500	55	8,900	89
2,200	22	5,600	56	9,000	90
2,300	23	5,700	57	9,100	91
2,400	24	5,800	58	9,200	92
2,500	25	5,900	59	9,300	93
2,600	26	6,000	60	9,400	94
2,700	27	6,100	61	9,500	95
2,800	28	6,200	62	9,600	96
2,900	29	6,300	63	9,700	97
3,000	30	6,400	64	9,800	98
3,100	31	6,500	65		
3,200	32	6,600	66	9,999	
3,300	33	6,700	67	or Over	99
3,400	34	6,800	68	Over	

Examples:

Motorcycle Value	Rating Value	Code
\$101	\$200	02
\$2550	\$2600	26

PRE-INSURANCE INSPECTION IDENTIFICATION CODE

Description	Code
Eligible for Pre-Insurance Inspection and Inspected	1
Eligible for Pre-Insurance Inspection and Not Inspected	2
Not Eligible or Waived	9

INTENSIFIED APPRAISAL IDENTIFICATION CODE

• This code is valid for Policy Effective Years 1995 and prior

Description	Claims <= \$4,000	Claims > \$4,000
Eligible for Intensified Appraisal and Appraised	3	5
Eligible for Intensified Appraisal and Not Appraised	4	6
Not Eligible	9	8

★ ORIGINAL COST NEW CODE

- Applies to vehicles with Original Cost New valued at \$90,001 and over, and reported with Symbol Code 12
- Report the vehicle's Original Cost New rounded to the nearest \$1,000

Examples:

Original Cost New	Code
\$90,001	090
\$125,650	126
\$502,230	502

ANTI-THEFT DEVICE DISCOUNT CODE

- Applies to other than collision coverage only
- ★ Refer to Section VIII Anti-Theft Device Standards and Discounts of the Commercial Automobile Insurance Manual for detailed descriptions of each category of anti-theft device or vehicle recovery system

Description	Code
No Discount Applies	0
Category I Applies	1
Category II Applies	2
Category III Applies	3
Category IV Applies	4
Category IV plus Category I Apply	5
Category IV plus Category II Apply	6
Category IV plus Category III Apply	7
Category V Applies	8
Category V plus Category I Apply	9
Category V plus Category II Apply	A
Category V plus Category III Apply	В

TYPE OF LOSS CODE – PHYSICAL DAMAGE

OTHER THAN COLLISION

Description	Code
Fire	01
Theft	02
 Glass For additional information on Glass Losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan 	03
Malicious Mischief and Vandalism	05
Cyclone, Earthquake, Explosion, Hail, Tornado, Water Damage and Windstorm	06
Flood and Rising Water	07
Towing and Labor Cost	08
All other types – excluding Collision	09
Other Than Collision Loss Due to Acts of Terrorism	97

COLLISION

Description	Code
 Without Waiver of Deductible – Collision loss payment when deductible is applied Limited Collision with a deductible 	10
 With Waiver of Deductible – Collision loss payment when deductible is applied 	11
 With Waiver of Deductible – Collision loss payment when deductible is waived Limited Collision with full coverage 	12

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Section A - Statistical Data Quality Components

The Statistical Data Quality Program consists of the components noted below. Each component identifies a specific company requirement or responsibility relative to the reporting of statistics to CAR and is intended to assure that CAR receives accurate statistical data on a timely basis. This Section also describes the special edits or methods used by CAR to verify the quality of reported statistical data.

1. STATISTICAL SUBMISSIONS

Companies are responsible for assuring that all of the data for a particular accounting month is received at CAR on or before the submission due date, and that the data is in processable and statistically acceptable condition. For those companies affiliated with a group, data must be reported at the individual company number level, rather than at the group level, as described in Part II – General Rules of the Plan. If any portion of the submission does not meet these requirements, Statistical Data Quality Penalties will be assessed. The key date to be used for determining penalty amounts will be the date upon which the last portion of the particular accounting month's shipment is received at CAR in processable and statistically acceptable condition. Refer to Section B - Statistical Data Quality Penalties of the Statistical Data Quality Program for specific penalty information.

In order to assure that a company's submission of data for a particular accounting month is complete, all premium and paid loss data for each accounting month must be submitted to CAR in a single mailing. However, it is acceptable for quarterly outstanding loss data to be submitted separately.

If a company is not able to consolidate their shipments for mailing to CAR, a request for waiver from this requirement must be filed with CAR. If CAR grants a waiver to this requirement, it is necessary for the company to continue to submit their data shipments to CAR in the same manner for each subsequent accounting month.

Companies may request the ability to report a supplemental submission to CAR after their original shipment for the accounting month has been submitted. Such supplemental submissions will not be accepted unless CAR has agreed in advance to accept the shipment. If CAR agrees to accept the supplemental submission, but it is not received by CAR until after the shipment due date, the shipment will be subject to applicable Statistical Data Quality Penalties in the same manner as other statistical submissions. Refer to Section B - Statistical Data Quality Penalties of the Statistical Data Quality Program for specific penalty information.

a. Compliance For Newly Reporting Companies

If a company or company group exceeds the established commercial reporting thresholds of \$50,000 in written premiums or \$25,000 in paid losses, as identified through the Annual Statement Reconciliation Process, statistical reporting to CAR must commence. Although the determination of whether a company exceeds the established thresholds is based upon the writings of an affiliated company group, statistical data must be reported to CAR on an individual company basis. Companies identified as exceeding the reporting thresholds will be required to report detailed statistical data no later than the December shipment of the second following year.

Example: The calendar year 2009 Statutory Page 14 for Massachusetts indicates that a company has exceeded the reporting thresholds. This company will be instructed to begin reporting to CAR no later than the December 2011 submission.

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Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (Continued)

b. Low Volume Company

A company or company group that has written less than \$500,000 in premium <u>and</u> \$500,000 in paid losses for reportable coverages during the prior calendar year based on the information contained on its Statutory Page 14 for Massachusetts is referred to as a low volume company. A low volume company may request the option of reporting data to CAR on a quarterly, rather than monthly, basis.

c. Due Date

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The due date is generally the first CAR business day 45 days after the close of each accounting month. CAR will notify the industry on a yearly basis of the specific submission due dates that will be in effect for the upcoming calendar year via the Call Schedule, which is issued as an Accounting and Statistical Notice. All premium, paid loss and outstanding loss submissions for a particular accounting month must be received in processable and statistically acceptable condition at the offices of CAR by the close of business on the established due date.

d. Turnaround Time Commitment

CAR provides companies with a turnaround time commitment relative to the receipt and processing of monthly submissions. The turnaround time commitment guarantees that all shipments received at CAR prior to the first business day of each month will be processed such that the company will be notified of any reporting problems or rejections no later than the fifth business day of that calendar month. In addition, if required by the company, these rejected tapes will be sent back to the company via Federal Express, no later than the fifth business day of the month, for the receipt by the company no later than the sixth business day of the month. The turnaround time commitment is subject to modification by CAR's Operations Committee.

If the established turnaround time commitment cannot be met by CAR, and as a result, a company's shipment is rejected and cannot be resubmitted by the shipment due date, the key dates used to calculate Statistical Data Quality Penalties for the affected shipments would be adjusted accordingly. However, the cut-off dates for monthly accounting/statistical shipments to be included in CAR's processing cycles would not be adjusted. For those companies that are financially impacted due to the exclusion of their monthly accounting/statistical shipment from a processing cycle because CAR did not meet its turnaround time commitment, CAR will reimburse the company for loss of investment income or provide another appropriate financial remedy.

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (Continued)

e. Acceptable Shipments

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For a shipment to be accepted by CAR, it must be received in processable condition as specified in the Accounting/Statistical Submission Reporting Instructions contained in the CAR Statistical Edit Package. In addition, the shipment must be in balance with its corresponding statistical and accounting summary control totals, and in statistically acceptable condition such that its statistical error content must be less than 15% of the shipment or less than 100 records. Note that the statistical error criteria will apply separately for premiums, paid losses, and outstanding losses, and on a subline basis. Additionally, for those companies affiliated with a group, statistical data must be reported at the individual company number level or the shipment will be considered incomplete and unacceptable.

A record is considered to be a statistical error record when it has one or more statistical errors. A record is considered to be a verification only error record when it has no statistical errors, but has one or more verification errors. Refer to CAR's Statistical Edit Package for a description of these errors. Verification errors are not included in the determination of error percentages or error record counts. The statistical error criteria will be waived for a particular shipment if the company confirms in writing to CAR that the shipment's error content exceeds the 15% tolerance because the submission contains offsets for previously reported error records, and consequently these offsets have caused the error percentage to exceed 15%.

Companies that have not reported complete and acceptable shipments to CAR by the shipment due date will be subject to Statistical Data Quality Penalties. Note that penalties are based on the receipt date at CAR of the last acceptable portion of the particular accounting month's shipment, and will therefore be the same if one portion of the shipment or the entire shipment is late or unacceptable. In addition, note that shipments received on weekends or holidays will be assigned the receipt date of the next CAR business day following the weekend or holiday. Refer to Section B - Statistical Data Quality Penalties Section of the Statistical Data Quality Program for specific penalty information.

f. Limits In Excess (LEX) Records

Any record with an extremely high exposure, premium dollar amount, or loss dollar amount (according to the following chart) will be identified for CAR Staff to review. Note that for the premium dollar tolerances, bodily injury and property damage premium amounts are checked separately for liability records and collision and other than collision premium amounts are checked separately for physical damage records. Also, note that the following classes are excluded from the relevant exposure checks: Garages Subject to Compulsory Law (physical damage only), Garages – Premises, Garages Not Subject to Compulsory Law, Non-Owned (Employees, P.P., Motorcycles, Hired), Non-Owned (Minimum Premium, Drive Other Car Coverage, Partnership – Non-Ownership, All Other), Special Rating and Adjustment, and Gross Receipts and Mileage.

Section A – Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (Continued)

f. Limits In Excess (LEX) Records (Continued)

LEX Tolerance Levels			
Field Tolerance			
Exposure -10,000 to +10,000 exposures			
Premium Dollar Amount -\$500,000 to +\$500,000			
Loss Dollar Amount -\$1,000,000 to +\$1,000,000			

CAR Staff will review records that exceed the established LEX tolerance levels. If it is determined that the records will significantly distort CAR's database, CAR will reject the affected shipments(s) and instruct the company to correct the records and resubmit the data immediately (prior to the shipment due date). Otherwise, CAR will accept the data and instruct the company to offset the records in a future submission.

2. <u>STATISTICAL ERRORS</u>

a. Due Date

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On a weekly basis, CAR updates its On-Line Telecommunications System, provides companies with statistical error files and establishes a due date for the necessary corrections to be completed. The established due date for the completion of on-line corrections is approximately 60 calendar days from the date the listings are available on-line.

b. Acceptability

Companies are responsible for assuring that statistical errors are corrected in a timely manner so that the number of uncorrected error records within an error file is reduced to no greater than 5%. Verification errors will be identified separately and will not be included in the determination of error percentages. If the number of error corrections submitted does not reduce the error content within the error file to the 5% tolerance by the due date, the errors will be re-listed on-line with a new due date. The company is required to make additional corrections to the error file until the 5% tolerance has been met.

Companies that are provided with statistical error files for several accounting months at the same time will be provided with additional time to correct these errors as long as the pertinent shipments were received at CAR in a timely and acceptable manner. Such cases will be handled on an individual basis. Taken into consideration will be the reason that several accounting months' files were provided at the same time, the volume of error records and any extenuating circumstances that may affect the timely correction of data.

Section A - Statistical Data Quality Components

2. STATISTICAL ERRORS (Continued)

c. Low Volume

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A statistical error file is considered low volume if both the total number of error records contained within the file and the total exposures, premiums or losses in error fall within the ranges indicated below. Statistical error files that meet this criteria will not be considered in an overdue status and will not be required to be corrected to reduce the error content to the 5% tolerance level.

Statistical Error Tolerance Levels			
CommercialTotal Numbers Of Error RecordsTotal Premium or L Dollars In Error			
Liability Premiums*	1 to 20	-\$2,500 to +\$2,500 premiums	
No-Fault Premiums	1 to 20	-\$2,000 to +\$2,000 premiums	
Physical Damage Premiums*	1 to 20	-\$2,000 to +\$2,000 premiums	
Liability Losses	1 to 15	-\$5,000 to +\$5,000 losses	
No-Fault Losses	1 to 15	-\$2,000 to +\$2,000 losses	
Physical Damage Losses	1 to 15	-\$2,000 to +\$2,000 losses	

* Commercial liability and physical damage tolerance levels are applied by coverage. That is, commercial liability bodily injury and property damage premiums, and physical damage other than collision and collision premiums in error must individually be within the indicated ranges.

3. <u>RATE EDIT</u>

CAR will edit ceded commercial premium data for the latest two policy effective years to assure that it has been rated properly. Only data that has successfully passed CAR's statistical edits will be rate edited, and companies will be notified by CAR of the rate edit results of their data.

a. Tolerance

Companies are responsible for assuring that their cumulative percentage of rate errors, for each line of business and policy effective year, remains below the established rate edit error tolerance of 2%. Once a company exceeds the rate edit error tolerance, and provided that there is a minimum of fifty error records per line of business, the company will be provided with six accounting months from the error listing cycle in which the tolerance was exceeded to reduce their cumulative rate edit error percentage, for that line of business and policy effective year, to within the established tolerance. In order to correct rate edit errors, companies are required to submit offset and re-enter adjustment records. Refer to the General Rules and Section A – Premiums of the General Reporting Requirements Sections of this Plan for information on reporting adjustment records.

Section A - Statistical Data Quality Components

3. <u>RATE EDIT (Continued)</u>

b. Appeal Process For Exceeding Established Tolerance

Companies with errors in excess of the established tolerance may appeal to CAR for a reduction of the Statistical Data Quality Penalty if it can be clearly demonstrated that the rate error condition does not impact the ratemaking database. The granting of an appeal will be allowed for one policy year only, and companies will be required to correct their reporting systems for the next reporting year in order to prevent the assessment of rate edit penalties in the subsequent reporting year.

4. MASSACHUSETTS ANNUAL STATEMENT

For each calendar year, all companies licensed to write automobile insurance in Massachusetts are required to submit an electronic copy of their NAIC Annual Statement filings to CAR by approximately March 15th of the following year. CAR also requires that companies submit a hard copy of their Annual Statement. For each of the other three calendar quarters, CAR collects Statutory Page 14 data for Massachusetts from companies. Note that for all quarters, Annual Statement data must be submitted for each individual company within a group via CAR's on-line Annual Statement Reconciliation System. CAR will inform the industry on an annual basis, via the Annual Call Schedule, of the exact quarterly and final Annual Statement due dates on a calendar year basis.

On a quarterly basis, CAR reconciles each company's Massachusetts Annual Statement data to the statistical data reported by the company through the particular quarter. The reconciliation is performed at the individual company level, not on a group company basis. The reconciliation is performed each quarter in an effort to identify, as soon as possible, reporting problems that may impact the quality of CAR's statistical database. Companies are provided with the results of their reconciliation. If it is determined that a company's statistically reported totals for a given quarter and their quarterly Annual Statement totals vary by more than 5% for any premium or loss line of business, CAR requests that the company provide a satisfactory written response explaining the difference(s). Additionally, if the difference is due to missing statistical data, then the company will be expected to provide an action plan that details when the missing data will be reported to CAR and how the situation that created the missing data will be rectified. Company responses must be provided to CAR within thirty (30) calendar days from the date that the reconciliation results were initially provided to the company.

★ 5. <u>DISTRIBUTIONAL ANALYSIS PROGRAM</u>

The Distributional Analysis Program is run on a semi-annual basis. Various reports are made available to companies on CAR's website which focus on the reporting of critical data elements used in a number of different processes such as quota share and ratemaking. Those data elements are used in comparing a company's distribution of statistically reported data to like distributions of industry-wide data. The edits are designed to determine whether significant variances are due to a company's unique book of business or reflective of a systemic reporting problem.

Section A - Statistical Data Quality Components

★ 5. <u>DISTRIBUTIONAL ANALYSIS PROGRAM (Continued)</u>

a. Due Date

Twice per year following the processing of the June and December monthly accounting/statistical shipments, CAR runs its Distributional Analysis program, posts results to its website for company review, and establishes a due date for the input of company explanations of any identified over tolerance conditions. The established due date for the entry of company explanations is approximately 60 calendar days from the date the Distributional Analysis reports are available.

b. Acceptability

In those instances where CAR identifies a potential reporting issue, it will formally notify those companies identified as having the potential reporting issue and provide a specific due date for the reporting issue to be resolved. In those instances where a company identifies a reporting issue, as a result of an over tolerance condition, the company should provide an action plan for fixing those issues going forward within a one year time period.

Section B - Statistical Data Quality Penalties

In order to encourage companies to report complete and accurate statistical data on a timely basis, CAR has established the Statistical Data Quality Penalties described below. The Statistical Data Quality Program only establishes those penalties that will apply for statistical purposes. Additional penalties may result due to accounting errors on ceded data, and these penalty provisions are contained in the CAR Manual of Administrative Procedures.

Mandated legislative changes and other contingencies that would delay the reporting or processing of data or require substantial operational changes will be reviewed as to their impact on the Statistical Data Quality Program. If sufficient lead time is not available to the companies to submit any of the required reportings to CAR, the Operations Committee will consider the potential need for temporary revisions or suspensions to the provisions of the Statistical Data Quality Program and its associated penalties.

1. STATISTICAL SUBMISSIONS

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This section details the Statistical Data Quality Penalty amounts assessed for late or unreported statistical submissions.

a. Compliance For Newly Reporting Companies

Companies that have not complied with reporting statistical submissions to CAR, after being identified as exceeding the established commercial reporting thresholds of written premiums and/or paid losses, will be assessed a \$12,500 Statistical Data Quality Penalty the first calendar year. If non-compliance continues, a \$30,000 penalty will be assessed after the second calendar year, and a \$60,000 penalty will be assessed each calendar year thereafter until statistical data reporting begins. Although the determination of whether a company exceeds the established thresholds is based upon the writing of the entire group, this penalty will be assessed on an individual company basis. It will be applied to each company within the identified group, regardless of whether the company on an individual basis has exceeded the reporting thresholds. In addition, the Division of Insurance will be notified of the company's non-compliance.

Example: The calendar year 2009 Statutory Page 14 for Massachusetts indicates that a company has exceeded the reporting thresholds. The company must begin reporting to CAR no later than the December 2011 submission. If a submission is not reported to CAR on or before this deadline, the company will be assessed a \$12,500 Statistical Data Quality Penalty. If the company again fails to report by the December 2012 submission, the company will be assessed a \$30,000 penalty. If the company fails to report by December 2013 submission, the company will be assessed a \$60,000 penalty, and the Division of Insurance will be notified of the company's non-compliance.

Section B - Statistical Data Quality Penalties

1. STATISTICAL SUBMISSION (Continued)

b. Low Volume Company

Low volume companies have a maximum penalty amount of \$1,500 for any one submission. Accordingly, companies reporting on a quarterly basis will never be assessed more than \$6,000 in a calendar year, and companies reporting on a monthly basis will never be assessed more than \$18,000 in a calendar year.

c. Late And Unacceptable Shipments

The Statistical Data Quality Penalty amounts accumulate based on the receipt date of the shipment. Statistical Data Quality penalty amounts accrue up to \$3,000 for a particular range of shipment receipt dates as shown in the chart below. An additional \$3,000 penalty is incurred for each additional calendar month that passes until the shipment is received. Since each company that is affiliated with a group is required to report their statistical data on an individual company basis, these penalties are also assessed on an individual company basis. For the shipment in the example below, a penalty of 3,000/month would be added to the \$3,000 amount previously accrued on the shipment since the displayed receipt date had passed.

Receipt Date at CAR of Last Acceptable Portion	Penalty Amount
After the shipment due date, but before the end of the month in which the shipment due date occurs	\$ 500
After the end of the month in which the shipment due date occurs, but on or before the due date of the next month's shipment	\$ 1,250
After the due date of the next accounting month's shipment, but before the end of the month in which this due date occurs	\$ 3,000
Each additional calendar month	\$3,000/month

xample: January Monthly Accounting Shipment Due 3/15					
Receipt Date of Shipment Calculation of Penalty Penalty Dollar					
3/16 – 3/31	\$ 500	\$ 500			
4/1 – 4/15	\$ 1,250	\$ 1,250			
4/16 - 4/30	\$ 3,000	\$ 3,000			
5/1	\$3,000 + \$ 3,000	\$ 6,000			
6/1	\$ 6,000 + \$ 3,000	\$ 9,000			

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Section B - Statistical Data Quality Penalties

2. <u>STATISTICAL ERRORS</u>

This section details the Statistical Data Quality Penalty amounts that companies will be assessed if an insufficient volume of statistical error corrections are applied.

Statistical Error Files Meeting the Following Criteria	Penalty Amount
The initial due date has expired and the error percentage has not been reduced to less than or equal to 5%	\$ 150
The error file has been re-listed, the second due date has expired, and the error percentage has not been reduced to less than or equal to 5%	\$ 600
Each additional re-listing with error percentages not less than or equal to 5%	\$1,250

Example: Statistical Error Percentage Not Reduced To Less Than or Equal to 5%: Error Corrections Due 4/30				
Due Date Calculation of Penalty Penalty Dollars				
4/30	\$150	\$ 150		
6/30	\$ 600	\$ 600		
8/30	\$ 1,250	\$ 1,250		
10/30	\$ 1,250 + \$ 1,250	\$ 2,500		

3. <u>RATE EDIT</u>

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This section details the Statistical Data Quality Penalties assessed for Rate Edit errors.

a. Error Penalties

Any company that does not reduce their error percentage to no greater than established rate edit tolerance within the six month timeframe will be assessed a Statistical Data Quality Penalty of \$3,000. Additionally, a penalty of \$3,000 per month will be assessed for each subsequent month that the error percentage remains uncorrected and a company remains over the rate edit tolerance.

b. Penalty Reduction

A penalty reduction will be granted only if it can be verified that the reported premiums and exposures are correct on a policy or summary level and are not in violation of the Massachusetts Commercial Statistical Plan. A penalty of \$3,000 will be assessed. However, the \$3,000 per month penalty for each subsequent month will not be assessed in this situation.

Section B - Statistical Data Quality Penalties

4. <u>MASSACHUSETTS ANNUAL STATEMENT AND QUARTERLY STATUTORY</u> <u>PAGE 14 FOR MASSACHUSETS</u>

A Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for the late submission of Fourth Quarter NAIC Annual Statement filings and corresponding copy of the Massachusetts Annual Statement. Also, a Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for a late Fourth Quarter Massachusetts Annual Statement Reconciliation response until CAR receives the response.

A Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for the late submission of quarterly Statutory Page 14 data for Massachusetts. Also, a Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for a late response to the reconciliation of the quarterly Statutory Page 14 for Massachusetts until CAR receives the response.

Since each company that is affiliated with a group is required to report its statistical data on an individual company number level and is required to report separate Massachusetts Annual Statement data and quarterly Statutory Page 14 for Massachusetts data, the Annual Statement penalties will also be assessed on an individual company basis.

★ 5. <u>DISTRIBUTIONAL ANALYSIS PROGRAM</u>

This section details the Statistical Data Quality Penalty amounts that companies will be assessed if a company does not respond to an over tolerance condition by the established due date and/or does not correct its statistical reporting issue, on a going forward basis, within one year of having been identified. Since each company that is affiliated with a group is required to provide a response on an individual company level, the penalties are also assessed on an individual company basis. Furthermore, the penalty is also assessed separately for premium and loss reporting.

Distributional Analysis Reports Meeting the Following Criteria	Penalty Amount
The initial due date has expired and the company has not responded to at least 75% of the cited over tolerance conditions	\$150
The company was notified of its missing explanation, the second due date has expired (60 days after the first due date), and the company has not responded to at least 75% of the cited over tolerance conditions	\$150
The one year due date for resolving an identified reporting issue has passed and the issue is not yet resolved	\$3,000
Each additional calendar month that the reporting issue is not resolved.	\$3,000

Section B - Statistical Data Quality Penalties

★ 5. <u>DISTRIBUTIONAL ANALYSIS PROGRAM (Continued)</u>

Example: June release of Distributional Analysis Reports approximately September 1				
Due Date For Response Calculation of Penalty Penalty Dollars				
11/1 \$150 \$150		\$150		
1/1	\$300	\$300		

Due Date For Resolved Reporting Issue	Calculation of Penalty	Penalty Dollars
June Monthly Submission of following year: approx. 8/15	\$3,000	\$3,000
July Monthly Submission of following year: approx. 9/15	\$3,000 + \$3,000	\$6,000
August Monthly Submission of following year: approx. 10/15	\$3,000 + \$3,000 + \$3,000	\$9,000

6. **DISPUTED PENALTY FEES**

CAR shall maintain its own records for the purpose of determining whether or not a company has submitted all required data. In case of a disagreement regarding whether a company is delinquent in submitting data, the records of CAR shall become the deciding factor. Statistical Data Quality Penalties may be appealed to CAR's Operations Committee. However, it is necessary for the company to pay the penalty amount before such an appeal can be considered. Any company aggrieved by the findings of the Operations Committee may appeal the decision to CAR's Governing Committee. All decisions of the Governing Committee shall be final.

COMMERCIAL RECORD LAYOUT MODIFICATION KEY

The Commercial Record Layout Modification Key should be used in conjunction with the Commercial Record Layouts contained on the following pages. The key identifies those fields to which modifications were made in prior policy years. For example, the field may have been reported in an alternate field position, or the field was added to or eliminated from the Commercial Record Layout. For reporting instructions for prior effective years, refer to the Massachusetts Commercial Automobile Statistical Plan in effect for the specific year (which can be found on CAR's website (www.commauto.com)).

No.	Valid Policy Effective Date(s)	Field	Subline Codes	Reporting Position
1	1989 through 1995	Intensified Appraisal Code	618 Losses	47
2	1991 and subsequent	Producer Code	All	61 - 66
3	10/1/1992 and subsequent Optional 3/1/1992–9/30/1992	Pollution Liability Broadened Coverage Code	611	48
	1005 and prior	Age Code	618	44
4	1995 and prior	Symbol Code (Motorcycle Value*)	618	44 - 46
		Zip Code	All	72 - 80
5	1995 and subsequent	Vehicle Identification Number	All	131 - 147
	1006 and subsequent	996 and subsequent Symbol Code (Motorcycle Value*) Age Code	618	45 - 46
6	1990 and subsequent		611,615,618	52
7	1998 and subsequent	Aggregate Limits Identifier Code	611	53
	2002 and prior	Class Group Code	All	54
8	2003 and subsequent	Reserved for Future Use	All	54
	2002 and prior	Claim Count	All Losses	90
9	2003 and subsequent	Reserved for Future Use		90
10	7/1/2003 and subsequent Optional 1/1/2003-6/30/2003	Terrorism Coverage Code	All Premium	60
1	2012 and subsequent Optional 7/1/2011-12/31/2011	Original Cost New Code	618	56 - 58

* For Policy Effective Years 1995 and prior, Motorcycle Value was a three position code that was reported within the Age Code and Symbol Code fields. For Policy Effective Years 1996 and subsequent, Motorcycle Value is a two a position code, reported within the Symbol Code field now located in positions 45-46.

Last Revision Date: 07/01/2011

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LIABILITY PREMIUM

<u> </u>		1					
1			51	ZONE RATING CODE (Continue	ed)	101	
2	COMPANY OR		52	AGE CODE	6	102	BODILY INJURY
	GROUP NUMBER CO	DE		AGE CODE	U		PREMIUM (Continued)
3			53	AGGREGATE LIMITS ID. CODE	\bigcirc	103	
				AGGINEGATE EIMITS ID. CODE	\odot		
4	TRANSACTION TYPE C	ODE	54	Reserved for Future Use	8	104	
5		ODE	55	Reserved for Future Use	•	105	
6	ACCOUNTING	Month	56	PASSIVE RESTRAINT DISC. CO	DDE	106	
7	DATE	Year	57	Reserved for Future Use		107	PROPERTY DAMAGE
8	POLICY	Month	58	Reserved for 1 didle Ose		100	PREMIUM
9	EFFECTIVE	Year	59	RATING IDENTIFICATION COI	DE	109	
10	DATE	Year	60	★ Terrorism Coverage Code	10	110	
10	DATE	rear	00	 Terrorism Coverage Code 		110	
11	TRANSACTION	Month	61			111	
12	EFFECTIVE	Year	62			112	
13	DATE	Year	63	PRODUCER CODE		113	Reserved for Future Use
14	POLICY	Month	64	2		114	
15	EXPIRATION	Year	65			115	
16	DATE	Year	66			116	
17			67			117	
18	STATE CODE		68	1		118	
19			69	Reserved for Future Use		119	
20	PREMIUM TOWN		70			120	
20	CODE		71	-		121	
21						121	POLICY
22	TYPE OF RISK COD			-		122	IDENTIFICATION
23			73	-		123	NUMBER
24	ANNUAL STATEMEN	л	74			124	
	LINE OF BUSINESS CO	DDE		ZIP CODE			
26			76 77	5		126	
27				-		127	
28	SUBLINE CODE		78			128	
29			79	-		129	
30			80			130	
31			81	-		131	
32	CLASSIFICATION		82	_		132	
33	CODE		83	_		133	
34			84	EXPOSURE		134	
35			85			135	
36	LIMITS IDENTIFIER CO	DDE	86			136	
37	BODILY INJURY		87			137	VEHICLE
38	LIMITS CODE		88	EXPERIENCE RATING		138	IDENTIFICATION
39	PROPERTY DAMAG	E	89	MODIFICATION FACTOR COL		139	NUMBER
40	LIMIT CODE		90			140	6
41	MEDICAL PAYMENT	S	91			141	9
42	LIMIT CODE		92			142	
43	UNINSURED MOTOR	ST	93	MODIFICATION FACTOR COL		143	
44	LIMITS CODE		94	Deserved for Fature U.		144	
45	UNDERINSURED MOTO	RIST	95	Reserved for Future Use		145	
46	LIMITS CODE		96			146	
47	Reserved for Future U	se	97	1		147	
				BODILY INJURY			
48	POLLUTION LIAB. COV. CO	DDE (3)	98	PREMIUM		148	
49			99	1		149	COMPANY USE
50	ZONE RATING COD	_	100			150	
P			<u> </u>			<u> </u>	

Refer to the Commercial Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Last Revision Date: 01/01/2003

LIABILITY LOSS

1			51	ZONE RATING CODE (C	ontinued)	101	
2	COMPANY OR GROUP NUMBER CODE		52	AGE CODE	6	102	
3			53	AGGREGATE LIMITS ID.	_	103	
4			54	Reserved for Future	Jse 🛞	104	
5		JODE	55	PARTIAL/TOTAL LOSS IN	DICATOR	105	
6	ACCOUNTING	Month	56	PASSIVE RESTRAINT DI	SC. CODE	106	CLAIM IDENTIFICATION
7	DATE	Year	57	Reserved for Future Use		107	NUMBER (Continued)
8 9	POLICY EFFECTIVE	Month Year	58 59	RATING IDENTIFICATIO	N CODE	108 109	
10	DATE	Year	60	Reserved For Future		110	
11		Month	61			111	
12	ACCIDENT	Day	62	PRODUCER COL		112	
13	DATE	Day	63		/ _	113	
14		Year	64	2		114	
15		Year	65			115	
16	Reserved for Future L	Jse	66			116	
17	STATE CODE		67	-		117	
18 19			68 69	Reserved for Future Use		118 119	
20	PREMIUM TOWN	l	70		036	120	
	20 CODE 21 CAR IDENTIFICATION CODE 22 CAR IDENTIFICATION CODE 23 TYPE OF RISK CODE 24 ANNUAL STATEMENT 25 LINE OF BUSINESS CODE 26 SUBLINE CODE 27 SUBLINE CODE 29		70			120	
			72	-		122	POLICY IDENTIFICATION
			73			123	
			74			124	NUMBER
25			75	ZIP CODE		125	
26			76	77 78 79		126	
27			77			127	
28			78			128	
						129	
30			80			130	
31			81	Reserved for Future		131	
32 33	CLASSIFICATION CODE		82 83	REPORTING	Month Year	132 133	
33	OODE		84	DATE	Year	133	
34			85	Reserved for		134	
36	LIMITS IDENTIFIER C	ODE	86	Future Use		136	
37	LIABILITY LIMITS		87			137	VEHICLE
38	CODE		88	TYPE OF LOSS CO		138	IDENTIFICATION
39	Reserved for Future L	Jse	89	Popon and for Euternal	se 9	139	NUMBER
40	ACCIDENT TOWN	, Т	90	Reserved for Future L	৯৮ ভ	140	5
41	CODE	-	91	-		141	S.
42			92	4		142	
43			93	4		143	
	44 45 Reserved for Future Use		94	LOSS AMOUNT		144	
45 46			95 LOSS AMOUNT 96			145 146	
40			90	-		140	
48	POLLUTION LIAB. COV. C	CODE 3	98	1		148	
49		-	99	CLAIM IDENTIFICA	ION	149	COMPANY USE
50	ZONE RATING COL	DE	100	NUMBER		150	
		nd I arrant		on Key on the first page	af this Cast		

Refer to the Commercial Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

NO-FAULT PREMIUM

1]	E A		n l	101	I
1	COMPANY OR		51	ZONE RATING CODE (Continued)	101	PIP (NO-FAULT)
2	GROUP NUMBER CODE		52	AGE CODE	3)	102	PREMIUM (Continued)
3			53			103	× ,
4		0005	54	Reserved for Future Use	3)	104	
5	TRANSACTION TYPE	CODE	55			105	
6	ACCOUNTING	Month	56	PASSIVE RESTRAINT DISC. COD	Ε	106	
7	DATE	Year	57	Reserved for		107	
8	POLICY	Month	58	Future Use		108	
9	EFFECTIVE	Year	59	RATING IDENTIFICATION CODE		109	Reserved for
10	DATE	Year	60	Terrorism Coverage Code)	110	Future Use
11	TRANSACTION	Month	61			111	
12	EFFECTIVE	Year	62			112	
13	DATE	Year	63	PRODUCER CODE		113	
14	POLICY	Month	64	2		114	
15	EXPIRATION	Year	65			115	
16	DATE	Year	66			116	
17	STATE CODE		67			117	
18	STATE CODE		68	Reserved for		118	
19	PREMIUM TOWN	N	69	Future Use		119	
20	CODE	•	70			120	
21	CAR IDENTIFICATION CODE		71			121	POLICY
22			72			122	IDENTIFICATION
23	TYPE OF RISK CO	DE	73			123	NUMBER
24	ANNUAL STATEME	NT	74			124	
25	LINE OF BUSINESS (75	ZIP CODE		125	
26			76	5		126	
27	ou :=: :: := o == =		77	e e e e e e e e e e e e e e e e e e e		127	
28	SUBLINE CODE		78			128	
29			79			129	
30			80			130	
31			81	4		131	
32	CLASSIFICATION CODE	N	82	4		132	
33	CODE		83	EXPOSURE		133	
34 35			84 85	EAPUSURE		134 135	
35	Reserved for Future	llse	86	1		135	
30	PIP COVERAGE CC		87	1		137	VEHICLE
38			88			138	IDENTIFICATION
39			89	EXPERIENCE RATING		139	NUMBER
40			90	MODIFICATION FACTOR CODE		140	
41			91			141	5
42			92			142	
43	Reserved for		93	MODIFICATION FACTOR CODE		143	
44	Future Use		94	Reserved for		144	
45			95	Future Use		145	
46			96			146	
47			97			147	
48			98	PIP (NO-FAULT)		148	
49			99	PREMIUM		149	COMPANY USE
50	ZONE RATING CO	VE	100	1		150	
<u>ا</u>			Ľ	1		<u>I</u>	

Refer to the Private Passenger Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Last Revision Date: (01/01/2003
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NO-FAULT LOSS

						π
1	COMPANY OR		51	ZONE RATING CODE (Continued)	101	
2	GROUP NUMBER CODE		52	AGE CODE 6	102	
3	0.0001 1.0002100	001	53		103	
4			54	Reserved for Future Use (8)	104	
5	TRANSACTION TYPE	ODE	55		105	
6	ACCOUNTING	Month	56	PASSIVE RESTRAINT DISC. CODE	106	CLAIM IDENTIFICATION
7	DATE	Year	57	Reserved for Future Use	107	
8	POLICY	Month	58	Reserved for Future Ose	108	NUMBER (Continued)
9	EFFECTIVE	Year	59	RATING IDENTIFICATION CODE	109	
10	DATE	Year	60	Reserved for Future Use	110	
11		Month	61		111	
12	ACCIDENT	Day	62	PRODUCER CODE	112	
13	DATE	Day	63		113	
14	27112	Year	64	2	114	
15		Year	65		115	
16	Reserved for Future	Use	66		116	
17	STATE CODE		67	4	117	
18		PREMIUM TOWN 68			118	
19	PREMIUM TOW			Reserved for Future Use	119	
20	CODE CAR IDENTIFICATION CODE TYPE OF RISK CODE ANNUAL STATEMENT		CODE 70		120	
21			71		121	POLICY
22			72	-	122	IDENTIFICATION
23			73	-	123	NUMBER
24			ANNUAL STATEMENT			124
25	LINE OF BUSINESS	CODE		ZIP CODE	125	
26 27			76	- 5	126 127	-
27	SUBLINE CODE			77 0		
20	SOBLINE CODE	-	78	-	128 129	
29 30			80	-	129	
30			80	+	130	
32	CLASSIFICATIO	N	82	-	132	
33	CODE		83	83		
34		83 84		Reserved for Future Use	133 134	
35			85	1	135	
36	Reserved for Future	Use	86	1	136	
37	PIP COVERAGE CO		87		137	VEHICLE
38	Dear It 5	Line	88	TYPE OF LOSS CODE	138	IDENTIFICATION
39	Reserved for Future	USE	89		139	NUMBER
40		N	90	Reserved for Future Use 9	140	Ē
41	ACCIDENT TOW CODE	IN	91		141	5
42	CODE		92]	142	
43			93]	143	
44			94	LOSS AMOUNT	144	
45	Reserved for Future	llse	95		145	
46	INESCIVED IOI FULUIE	030	96		146	
47			97		147	
48			98		148	
49	ZONE RATING CC	DE	99	CLAIM IDENTIFICATION	149	COMPANY USE
50			100	NUMBER	150	
			·		· ·	

Refer to the Commercial Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Last Revision Date: 01/01/2003

PHYSICAL DAMAGE PREMIUM

			I I		a 1	
1	0010111		51	ZONE RATING CODE (Continued)	101	OTHER THAN
2	COMPANY OR GROUP NUMBER CODE		52	AGE CODE 6	102	COLLISION PREMIUM
3			53	ANTI-THEFT DEVICE DISC. CODE	103	(Continued)
4		CODE	54	Reserved for Future Use (8)	104	
5	TRANSACTION TYPE	CODE	55	Reserved for Future Ose	105	
6	ACCOUNTING	Month	56		106	
7	DATE	Year	57]★	107	COLLISION
8	POLICY	Month	58	ORIGINAL COST NEW CODE (1)	108	PREMIUM
9	EFFECTIVE	Year	59	RATING IDENTIFICATION CODE	109	
10	DATE	Year	60	TERRORISM COV. CODE 🔞	110	
11	TRANSACTION	Month	61		111	
12	EFFECTIVE	Year	62		112	
13	DATE	Year	63	PRODUCER CODE	113	Reserved for Future Use
14	POLICY	Month	64	2	114	
15	EXPIRATION	Year	65		115	
16	DATE	Year	66		116	
17	STATE CODE		67	_	117	
18			68	Deserved for Enture Line	118	
19	PREMIUM TOWN	N	69	Reserved for Future Use	119	
20 21	CODE		70 71	_	120 121	
21	CAR IDENTIFICATION	CODE	71		121	POLICY
23	TYPE OF RISK CO		72	-	122	IDENTIFICATION
24		02	74	-	124	NUMBER
25	ANNUAL STATEMENT		75	ZIP CODE	125	
26	LINE OF BUSINESS (CODE	76	-	126	
27			77	5	127	
28	SUBLINE CODE		78	7	128	
29			79		129	
30			80		130	
31			81		131	
32	CLASSIFICATION	N	82	_	132	
33	CODE		83		133	
34			84	EXPOSURE	134	
35	Poppriad for Fitter		85		135	
36 37	Reserved for Future	058	86 87	-1	136 137	VEHICLE
37	OTHER THAN COLLI		88		137	IDENTIFICATION
39	COVERAGE COD	θE	89	EXPERIENCE RATING	130	NUMBER
40			90	MODIFICATION FACTOR CODE	140	
41	COLLISION	-	91		141	5
42	COVERAGE COD		92		142	
43		Ô	93	MODIFICATION FACTOR CODE	143	
44	Reserved for Future Use	4	94	Reserved for Future Use	144	
45	0.4.50.00==		95		145	
46	SYMBOL CODE	46	96		146	
47	PRE-INSURANCE INSP.	ID CODE	97	OTHER THAN	147	
48	Reserved for Future	Use	98	COLLISION PREMIUM	148	
49	ZONE RATING CO	DE	99	_	149	COMPANY USE
50			100		150	
Dafa		1 D 1	T /	Modification Key on the first	C.1.	

Refer to the Commercial Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Last Revision Date: 07/01/2011

PHYSICAL DAMAGE LOSS

1			51		ZONE RATING CODE (Conti	nued)	101	
	COMPANY OR				· · · · ·	-		
2	GROUP NUMBER CODE		52			©	102	
3			53		ANTI-THEFT DEVICE DISC. (JODE	103	
4	TRANSACTION TYPE CODE		54	_	Reserved for Future Use	8	104	
5			55		PARTIAL/TOTAL LOSS INDIC	ATOR	105	CLAIM
6	ACCOUNTING	Month	56	_ ★	٢		106	IDENTIFICATION
7	DATE	Year	57	_	ORIGINAL COST NEW COD	ЕÛ	107	NUMBER (Continued)
8	POLICY	Month	58				108	- (
9	EFFECTIVE DATE	Year	59		RATING IDENTIFICATION C		109	
10	DATE	Year	60		Reserved for Future Use)	110	
11 12		Month Day	61 62				111 112	
12	ACCIDENT	Day	63		PRODUCER CODE		112	
14	DATE	Year	64		2		114	
15		Year	65		E		115	
16	Reserved for Future		66				116	
17			67				117	
18	STATE CODE		68				118	
19	PREMIUM TOWN	J	69		Reserved for Future Use		119	
20	CODE	N	70				120	
21	CODE		71				121	POLICY
22	CAR IDENTIFICATION	CODE	72				122	IDENTIFICATION
23	TYPE OF RISK CO	DE	73				123	NUMBER
24	ANNUAL STATEMENT LINE OF BUSINESS CODE LINE OF BUSINESS CODE SUBLINE CODE		74		ZIP CODE ⑤		124	
25			75				125	
26			76				126	
27			77	77 78 79		127		
28 29							128 129	
29 30			79 80				129	
30			81				130	
32	CLASSIFICATION	N	82		_		132	
33	CLASSIFICATION		83		Reserved for Future Use		133	
34			84				134	
35			85				135	
36	Reserved for Future	Use	86		CATASTROPHE CODE		136	
37			87		TYPE OF LOSS CODE		137	
38	COVERAGE COD	E	88				138	VEHICLE IDENTIFICATION
39			89		Reserved for Future Use	9	139	NUMBER
40	ACCIDENT TOW	N	90			,	140	
41	CODE	•	91				141	5
42			92				142	
43	Reserved for Future U	se (4)	93				143	
44		~	94				144	
45 46	SYMBOL CODE (4)(6)		95 96		LOSS AMOUNT		145 146	
47	INTENSIFIED APPRAISAL ID	CODE ①	97				147	
48	Reserved for Future	Use	98				148	
49			99		CLAIM IDENTIFICATION	1	149	COMPANY USE
50	ZONE RATING CO	ZONE RATING CODE 100 NUMBER 150						
		1 7			Key on the first page of t	1.1.0		

Refer to the Commercial Record Layout Modification Key on the first page of this Section for further information on prior modifications to the noted fields.

Massachusetts Commercial Automobile Statistical Plan Index

A

Accident Date, V:1-V:2, V:8-V:9, V:14-V:15 Accident Reporting, III:8 Accident Town Code, V:3, V:10, V:16 Accident Town Tables See Premium Town Tables Accounting Date, IV:1, IV:7, IV:12, V:1, V:8, V:14 Adjustments. See Endorsements Age Code, IV:4, IV:9, IV:14, V:4, V:10, V:17, VI:26 Aggregate Limits Identifier Code, IV:4, V:4, VI:42 All Other Rating Modification Factor Code, IV:5, IV:11, IV:16, VI:37 Allocated Loss Adjustment Expenses (ALAE), III:9–III:10 Annual Statement Line of Business Code, IV:2, IV:8, IV:13, V:2, V:9, V:15, VI:6 Anti-Theft Device Discount Code, IV:15, V:17, VI:59 Audit. See Policies Subject to Audit

С

CAR Identification Code, IV:2, IV:8, IV:13, V:2, V:9, V:15, VI:3-4 Catastrophe Code, V:18 Claim Definition, III:6 Claim Identification Number, V:6, V:12, V:13, V:19, VI:38 reporting of, III:8 Classification Code, IV:3, IV:9, IV:14, V:2, V:10, V:16 Commercial Motorcycles, VI:20 Garages Risks Not Subject to the Compulsory Law, VI:22 Risks Subject to the Compulsory Law, VI:21 Non-Owned Automobiles, VI:23 Private Passenger Types, VI:13

C (continued)

Classification Code (continued) Public Transportation, VI:16 Publics fleet, VI:14 miscellaneous, VI:16 non-fleet. VI:15 Special Rating and Adjustment, VI:24 Special Types, VI:18-19 Trucks, Tractors, Trailers, VI:8 primary classification code, VI:9 secondary classification code, VI:10-VI:12 Van Pools, VI:17 Collision Coverage Code, IV:14, VI:52 garage coverages, VI:53 miscellaneous coverages, VI:53 Companies in a Run-Off Position, II:2 Company (Group) Number Code, IV:1, IV:7, IV:12, V:1, V:8, V:14 Coverage Code, V:16

D

Data Reporting Requirements, II:2–II:3, II:4 alphanumeric/numeric coding, II:3 consolidated shipment reporting, II:3 monthly/quarterly submissions, II:3 reporting of spaces, II:3 Decision Tables Tables of Required Fields, A:1 Classification Code Decision Table, A:2 Coverage Code Decision Table, A:3 Exposure Basis Table, A:4

E

Effective Date of the Plan, I:2 Endorsements reporting changes in coverage, III:2–III:3 as of policy effective date, III:2 subsequent to policy effective date, III:2– III:3 Experience Rating Modification Factor Code, IV:5, IV:10, IV:16, VI:36 Exposure, IV:5, IV:10, IV:16, VI:34-35 reporting of exposure, III:2 Extending a Policy, III:5

Massachusetts Commercial Automobile Statistical Plan Index

E (continued)

Extent of Vehicle Loss. *See* Partial/Total Loss Indicator Extra-Risk Rating, III:13

G

Glass Losses, III:13

I

Installment Policies, III:5 Intensified Appraisal Identification Code, V:16, VI:57 Intercompany Reimbursement of PIP Claims, III:10–III:11 Intracompany Reimbursement of PIP Claims, III:11

L

Liability Limits Code (Losses), V:3 Limits Codes Bodily Injury Limits Code, IV:3, VI:43 Combined Single Limit, VI:44 Liability, VI:43-44 Medical Payments Limit Code, IV:3, VI:43 Property Damage Limit Code, IV:3, VI:43 Underinsured Motorist Limits Code, IV:3, VI:43 Uninsured Motorist Limits Code, IV:3, VI:43 Limits Identifier Code, IV:3, V:3, VI:41 Limits in Excess (LEX) Records, VII:3-VII:4 Loss Amount, V:6, V:12, V:19 Loss Requirements, III:6-III:13 reporting of losses, III:6 Low Volume Companies, II:1, VII:2 eligibility, II:1

M

Massachusetts Annual Statement Page 15, II:2 non-compliance penalties, VII:10 reconciliation of, II:2, VII:6 Massachusetts Automobile Insurance Expense Call, II:2, VII:6 non-compliance penalties, VII:10 Multiple Year Policies, III:5

Ν

Nil Submission, II:1, VII:2

0

★ Original Cost New Code, VI:58
 Other Than Collision Coverage Code, IV:14, VI:49
 garage coverages, VI:51
 miscellaneous coverages, VI:50
 Outstanding Losses, III:13

P

Partial/Total Loss Indicator, III:13, V:4, V:17, VI:28 Passive Restraint Device Discount Code, IV:4, IV:9, V:4, V:11, VI:29 PIP Coverage Code, IV:9, V:10, VI:47 Policies Subject to Audit. III:5 Policy Effective Date, IV:1, IV:7, IV:12, V:1, V:8, V:14 Policy Expiration Date, IV:2, IV:8, IV:13 Policy Identification Number, IV:6, IV:11, IV:17, V:6, V:13, V:19, VI:39 Pollution Liability Broadened Coverage Code, IV:3, V:3, VI:45 Pre-Insurance Inspection Identification Code, IV:14, VI:56 **Premium Amounts** Bodily Injury Premium Amount, IV:5 Collision Premium Amount, IV:16 Other Than Collision Premium Amount, IV·16 PIP (No-Fault) Premium Amount, IV:11 Property Damage Premium Amount, IV:6 Premium Modification, III:4 Premium Requirements, III:1-III:5 premium cancellation, III:3 flat cancellation, III:3 pro rata cancellation, III:3 short rate cancellation, III:4 reporting of premiums, III:1 Premium Town Code, IV:2, IV:8, IV:13, V:2 Premium Town Tables, B:1-14 Alphabetical Listing, B:1-7 Numerical Listing, B:8-14

Massachusetts Commercial Automobile Statistical Plan Index

P (continued)

Producer Code, IV:4, IV:10, IV:15, V:5, V:11, V:18, VI:32

R

Rate Edit appeal process, VII:6 associated penalties, VII:9 error tolerances, VII:5 penalty reduction, VII:9 Rating Identification Code, IV:4, IV:10, IV:15, V:4, V:11, V:17, VI:30 Record Layout Modification Key, VIII:1 Record Layouts Liability Loss, VIII:3 Liability Premium, VIII:2 No-Fault Loss, VIII:5 No-Fault Premium, VIII:4 Physical Damage Loss, VIII:7 Physical Damage Premium, VIII:6 Reporting Date, V:5 Reporting Thresholds, II:1, VII:1 Risks Ceded to Commonwealth Automobile Reinsurers, II:4

S

Salvage Recoveries/Expenses, III:12 Shipment Due Dates, VII:2 Single Limit Policies, III:1 State Code, IV:2, IV:8, IV:13, V:2, V:9, V:15, VI:2 Statistical Data Quality Program Components, VII:1-VII:7 Penalties, VII:8-VII:12 Statistical Error Listings acceptability, VII:4 due date, VII:4 insufficient volume of corrections applied, VII:9–VII:10 late return of corrections, VII:9 low volume, VII:5 Statistical Submissions acceptability criteria, VII:3 company responsibilities, VII:1

S (continued)

Subline Code, IV:3, IV:8, IV:13, V:2, V:9, V:15, VI:7 Subrogation Recoveries/Expenses, III:11–III:12 allocated loss adjustment expense recoveries, III:12 indemnity recoveries, III:11–III:12 Symbol Code, IV:14, V:16, VI:54 Motorcycle Value, VI:54

Т

Terrorism Coverage Code III:6, IV:4, IV:10, IV:15, VI:31 Transaction Effective Date, IV:1, IV:7, IV:12 Transaction Type Code, IV:1, IV:7, IV:12, V:1, V:8, V:14, VI:1 Turnaround Time Commitment, VII:2 Type of Loss Code, V:5, V:12, V:18 liability, VI:46 physical damage collision, VI:60 other than collision, VI:60 PIP (no-fault), VI:48 Type of Risk Code, IV:2, IV:8, IV:13, V:2, V:9, V:15, VI:5

U

Unallocated Loss Adjustment Expenses, III:10

V

Vehicle Identification Number, IV:6, IV:11, IV:17, V:7, V:13, V:19, VI:40 Vehicle Value Code, VI:55 VIN. *See* Vehicle Identification Number

Z

ZIP Code, IV:5, IV:10, IV:15, V:5, V:12, V:18, VI:33 Zone Rating Code, IV:3, IV:9, IV:14, V:3, V:10, V:17, VI:25

Massachusetts Commercial Automobile Statistical Plan

Appendix A - Classification and Coverage Code Decision Tables

TABLES OF REQUIRED COMMERCIAL FIELDS

The fields identified below are required to be reported on all commercial statistical records and are therefore not listed in the Decision Tables contained on the following pages. For all other fields not noted below, refer to the Classification Code and Coverage Code Decision Tables to determine which fields are required to be reported. For information regarding the exposure reporting basis for each commercial classification code, refer to the Exposure Basis table.

Fields Common to All Records
Accounting Date
Annual Statement Line of Business Code
CAR Identification Code
PIP Coverage Code (No-Fault)
Policy Effective Date
Policy Identification Code
Producer Code
State Code
Subline Code
Transaction Type Code
Type of Risk Code

Fields Common to Premium Records Only
All Other Rating Modification Factor Code
Experience Rating Modification Factor Code
Policy Expiration Date
Premium Amounts
Terrorism Coverage Code
Transaction Effective Date

Fields Common to Loss Records Only

Accident Date Catastrophe Code (Physical Damage) Claim Identification Number Loss Amount Reporting Date (Liability) Type of Loss Code

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Massachusetts Commercial Automobile Statistical Plan Appendix A - Classification and Coverage Code Decision Tables

CLASSIFICATION CODE DECISION TABLE

	*																				
	Vehi	cle Type	Accident Town Code	Age Code	Aggregate Limits ID Code	Anti-Theft Device Disc Code	Exposure	Intensified Appraisal ID	Limits Code (Liability)	Limits Identifier Code	Original Cost New Code	Partial/Total Loss Indicator	Passive Restr. Disc. Code	Pollution Liability Cov. Code	Pre-insurance Insp. ID Code	Premium Town Code	Rating Identification Code	Symbol Code (Cost New/Value)	Vehicle Identif. Number	ZIP Code	Zone Rating Code
F	Trucks, Tractors	Zone Rated	Y	Y	Ν	Ν	Y	Y	Y	Y	Y	Y	Ν	Y	Y	Ν	Y	Y	Y	Ν	Y
	and Trailers	Not Zone Rated	Y	Y	Ν	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Ν
F	Priv.Pass.Types	Fleet and Non-Fleet	Y	Y	Ν	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Ν
F		Zone Rated	Y	Y	Ν	Ν	Y	Y	Y	Y	Y	Y	Ν	Y	Y	Ν	Y	Y	Y	Ν	Y
_	Public	Not Zone Rated	Ŷ	Y	N	N	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	N
٢	Transportation	Transportation Network Services Use	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
	Van Pools	Fleet and Non-Fleet	Υ	Υ	Ν	Ν	Υ	Υ	Υ	Y	Υ	Y	Ν	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Ν
		7214,7908,7911, 7915, 7922 9620 7926,7927	Y Y Y	Y N Y	N N	N N	Y Y Y	Y Y Y	Y Y Y	Y Y Y	Y N Y	Y Y Y	N N	Y Y Y	Y Y Y	Y Y Y	Y Y Y	Y N Y	Y Y Y	Y Y Y	N N N
	Special Types	0456,0706,0707,7040, 7219, 7924, 7925, 7953,7964,9460, *7809, *7811, *7813	Y	N	N	N	Y	N	Y	Y	N	N	N	Y	N	Y	Y	N	N	Y	N
		7213,7216,7934, 7939, 7965,7906,7907,0452	Y	Y	N	N	Y	N	Y	Y	Y	Y	N	Y	N	Y	Y	Y	Y	Y	Ν
		7987	N	N	N	N	Y	N	N	N	N	N	N	N	N	Y	Y	N	N	Y	N
F	Commercial Materia	Other Spec.Types	Y	Y	N	N	Y	N	Y	Y	Y	Y	N	Y	N	Y	Y	Y	Y	Y	N
╞	Commercial Motorcy	Cles Subj. to Comp. Law	Y Y	Y N	N N	Y N	Y Y	N N	Y Y	Y Y	N N	Y N	N N	Y Y	N N	Y Y	Y Y	Y N	Y N	Y Y	N N
	Garages*	Not Subj. (0750)	Y	N	Y	N	Y	N	Y	Y	N	N	N	Y	N	Y	Y	N	N	Y	N
		Not Subj (7070)	Υ	Ν	Υ	Ν	Υ	Ν	Y	Υ	Ν	Ν	Ν	Υ	Ν	Υ	Υ	Ν	Ν	Υ	Ν
L		Premises (0704,0705)	Υ	Ν	Υ	Ν	Υ	Ν	Υ	Υ	Ν	Ν	Ν	Ν	Ν	Y	Υ	Ν	Ν	Υ	Ν
ſ		6619,7000	Ν	Ν	Ν	Ν	Ν	Ν	Y	Y	Ν	Ν	Ν	Υ	Ν	Ν	Y	Ν	Ν	Ν	Ν
	Non-Owned Automobiles	6611,6613, 6626,6628,5000	N	Ν	Ν	Ν	Y	Ν	Y	Y	Ν	Ν	Ν	Y	Ν	Ν	Y	Ν	Ν	Ν	Ν
	/ 101011001100	9020	Ν	Ν	Ν	Ν	Ν	Ν	Y	Y	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
L		Other Non-Owned	Ν	Ν	Ν	Ν	Y	Ν	Y	Y	Ν	Ν	Ν	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν
Ι		0599,0898,0899	N	N	N	N	Y	N	Y	Y	N	N	N	Y	N	N	Y	N	N	N	Ν
1	Special Rating &	8000,9980,9990	Ν	Ν	Ν	Ν	Ν	Ν	Y	Y	Ν	Ν	Ν	Υ	Ν	Ν	Υ	Ν	Ν	Ν	Ν
	Adjustment	9981,9982,9985, 9987,9989	N	N	N	N	N	N	Y	Y	N	N	N	Y	N	N	Y	N	N	N	N
1		9932	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Y	Ν	Ν	Ν	Ν

* For all Garage Classifications (including the codes now classified as Special Types), Exposure is not required for physical damage coverages.

Massachusetts Commercial Automobile Statistical Plan

Appendix A - Classification and Coverage Code Decision Tables

COVERAGE CODE DECISION TABLE

• For all shaded areas, refer to the Classification Code Decision Table

• Applicable to Physical Damage records

	Oth	er Ti	nan	Coll	isio	า									
Coverage Code	Accident Town Code	Age Code	Anti-Theft Device Disc. Code	Classification Code	Exposure	Intensified Appraisal Code	Original Cost New Code	Partial/Total Loss Indicator	Pre-Insurance Insp. ID Code	Premium Town Code	Rating Identification Code	Symbol Code (Cost New/Value)	Vehicle Identification Number	ZIP Code	Zone Rating Code
005,065,105,165,265,365,465,565			Ν	Υ											
060,063		Ν		Υ											
050-054,059	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
080,081,082	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
083,087	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
084	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν		Ν	Ν	Ν	Ν
089	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν		Ν	Ν	Ν	Ν
202-204,211-217		Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν		Υ	Ν	Ν		Ν
All Other OTC Coverages				Υ											

		С	ollis	ion											
Coverage Code	Accident Town Code	Age Code	Anti-Theft Device Discount	Classification Code	Exposure	Intensified Appraisal Code	Original Cost New Code	Partial/Total Loss Indicator	Pre-Insurance Insp. ID Code	Premium Town Code	Rating Identification Code	Symbol Code (Cost New/Value)	Vehicle Identification Number	ZIP Code	Zone Rating Code
012-019,040,042-049,072,076-079			Ν	Υ											
090,091,093,094	Ν	Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν	Ν
041,092,095		Ν	Ν	Υ											
099	Ν	Ν	N	Υ	Ν	Ν	Ν	Ν	Ν	Ν		Ν	Ν	Ν	Ν
311-313,317,477,478		Ν	Ν	Υ	Ν	Ν	Ν	Ν	Ν		Y	Ν	Ν		Ν
411				Υ											

Last Revision Date: 01/01/2016

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Massachusetts Commercial Automobile Statistical Plan Appendix A – Classification and Coverage Code Decision Tables

COMMERCIAL CLASSFICATION CODES EXPOSURE BASIS

Classification	Exposure Basis	Examples/Comments				
Trucks, Tractors and Trailers						
Private Passenger Types						
Public Transportation	=					
Van Pools	Car Months	Report Ex	posure as n	umber of ca	r months	
Commercial Motorcycles		in poir 2.	postile us in			
	=					
Special Types: Classes other than 7809, 7811 and 7813	_					
Classes other than 7809, 7811 and 7813		Distas	Plates Months		Exposure	
		(1)	(2)	Result $(1)x(2)$	Code	
Classes 7809, 7811 and 7813 only	Plate Basis	21	12	252	0000252	
		100	12	1,200	0001200	
		Limit of I	Insurance	Exposu		
Business Interruption (Class 7987)	Limit of Insurance	\$10.	.000	0010		
			\$50,000		0000	
Garages: Exposure not required for ph	vsical damage	+••,				
Subject to Compulsory Law (Classes 0704, 0705 only)		Payroll or	Round to Nearest	Units of One	Exposure Code	
and	Payroll Basis	Earnings	Hundred	Hundred		
Not Subject to Compulsory Law		\$10,711	\$10,700	\$107	0000107	
(Classes 0750, 7070)		\$250,295	\$250,300	\$2,503	0002503	
		Plates	Months	Result	Exposure	
Subject to Compulsory Law	Plate Basis	(1)	(2)	(1)x(2)	Code	
(Classes other than 0704, 0705)		21	12	252	0000252	
		100	12	1,200	0001200	
Non-Owned Automobiles:					-	
Non-Ownership Liability		Employees		Result	Exposure	
(Employees – Classes 6601, 6602, 6603,	Employee Months	(1)	(2)	(1)x(2)	Code	
6604, 6605, 6671)		20	12	240	0000240	
		155	12	1,860	0001860	
New Oran emble Lieb 'l'		Volunteers		Result	Exposure	
Non-Ownership Liability	Volunteer Months	(1)	(2)	(1)x(2)	Code	
(Volunteers – Classes 6670, 6672)		45 271	12	540 3,252	0000540 0003252	
Hired Autos	Cost of Hire	Cost of Hire	Round to Nearest Hundred	Units of One Hundred	Exposure Code	
(Classes 6611, 6613, 6626, 6628, 5000)		\$17, 452	\$17,500	\$175	0000175	
		\$337,927	\$337,900	\$3,379	0003379	
Other Non-Owned (Classes 6619, 9020, 7000)			ure required			

Last Revision Date: 01/01/2016

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Page: A:4

Massachusetts Commercial Automobile Statistical Plan Appendix A – Classification and Coverage Code Decision Tables

COMMERCIAL CLASSFICATION CODES EXPOSURE BASIS (continued)

Classification	Exposure Basis	E	xamples/	Comment	S
Special Rating and Adjustment:					
Gross Receipts (Classes 0599,0899)	Gross Receipts Basis	Gross Receipts	Round to Nearest Hundred	Units of One Hundred	Exposure Code
• • •	· ·	\$12, 448	\$12,400	\$124	0000124
		\$250,295	\$250,300	\$2,503	0002503
Mileage (Classes 0599, 0898)	Mileage Basis	Mileage	Round to Nearest Hundred	Units of One Hundred	Code
		9,087 57,442	9,100 57,400	91 574	0000091 0000574
All Other (than Gross Receipts and Mileage)		No Exposu	re required.		

PREMIUM TOWN CODE - ACCIDENT TOWN CODE

ALPHABETICAL LISTING

- 1. Cities and Towns are printed in Capital Letters.
- 2. Villages, Sections of Cities and Towns, and Local Designations are printed in Small Type with the name of the corresponding City or Town in the adjacent column.
- 3. Sections of Cities and Towns designated "North", "East", "South" and "West" or with a prefix or suffix that is merely supplemental to the principal name (such as West Newton or Arlington Heights) are not separately listed (see principal designation). In some instances there are two distinct townships, such as Reading and North Reading, in which case both towns are listed.
- 4. Counties are indicated by code, using the first position of the Town Code as follows:

First Position	County	First Position	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

 \star 5. The City of Boston is divided into sections as follows:

	City of Boston									
Definition	Statistical Code									
BOSTON CENTRAL	02108-02111, 02113-02116, 02118, 02133, 02199, 02201, 02203, 02210, 02215, 02222, 02241	821								
BRIGHTON	02134, 02135, 02163	822								
CHARLESTOWN-EAST BOSTON	02128, 02129	824								
DORCHESTER	02122, 02124, 02125, 02126	819								
HYDE PARK	02136	818								
JAMAICA PLAIN	02130	817								
ROSLINDALE	02131	816								
ROXBURY	02119, 02120, 02121	820								
SOUTH BOSTON	02127	823								
WEST ROXBURY	02132	815								

6. The appropriate Out of State Town Codes are as follows:

Location	Code
Connecticut	991
Maine	992
New Hampshire	993
New York	994
Rhode Island	995
Vermont	996
Other	999

Last Revision Date: 01/01/2016

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
	Α		933	BERLIN	BERLIN
		1000000	471	BERNARDSTON	BERNARDSTON
010	ABINGTON	ABINGTON	312	BEVERLY	BEVERLY
041	Accord	NORWELL	634	BILLERICA	BILLERICA
240	Acoaxet	WESTPORT	719	Bird Mills	WALPOLE
630	ACTON	ACTON	112	Blackington	NORTH ADAMS
230	ACUSHNET	ACUSHNET	934	BLACKSTONE	BLACKSTONE
110	ADAMS	ADAMS	490	BLANDFORD	BLANDFORD
215	Adamsdale	NORTH ATTLEBORO	970	BOLTON	BOLTON
431 420	Adamsville	COLRAIN	423	Bondsville	PALMER
	AGAWAM ALFORD	AGAWAM	821	BOSTON (Central)	BOSTON (Central)
170 035	Allerton	ALFORD HULL	050	BOURNE	BOURNE
822	Allston	BRIGHTON (Boston)	050	Bournedale	BOURNE
310	AMESBURY	AMESBURY	201	Bowenville	FALL RIVER
510	AMHERST	AMHERST	671	BOXBOROUGH BOXFORD	BOXBOROUGH BOXFORD
311	ANDOVER	ANDOVER	370		
311 314	Annisquam	GLOUCESTER	971	BOYLSTON	BOYLSTON
040	Antassawamock Neck	MATTAPOISETT	302	Bradford	HAVERHILL HATFIELD
610	ARLINGTON	ARLINGTON	532	Bradstreet	
333	Asbury Grove	HAMILTON	637	Braggville BRAINTREE	HOLLISTON BRAINTREE
930	ASHBURNHAM	ASHBURNHAM	710		MARSHFIELD
930 670	ASHBY	ASHBY	039	Brant Rock	BREWSTER
712	AShbr	DEDHAM	080	BREWSTER	
470	ASHFIELD	ASHFIELD	011	BRIDGEWATER	BRIDGEWATER
631	ASHLAND	ASHLAND	183	Brier	SAVOY CLARKSBURG
137	Ashley Falls	SHEFFIELD	131	Briggsville BRIGHTON	BRIGHTON (Boston)
033	Assinippi	HANOVER	822		
233	Assonet	FREETOWN	400	Brightwood BRIMFIELD	SPRINGFIELD
910	ATHOL	ATHOL	491	BROCKTON	BRIMFIELD BROCKTON
703	Atlantic	QUINCY	002 935	BROOKFIELD	BROOKFIELD
210	ATTLEBORO	ATTLEBORO	702	BROOKLINE	BROOKLINE
215	Attleboro Falls	NORTH ATTLEBORO	735	Brookville	HOLBROOK
931	AUBURN	AUBURN	042	Bryantville	PEMBROKE
605	Auburndale	NEWTON	430	BUCKLAND	BUCKLAND
715	Avery	NEEDHAM	635	BURLINGTON	BURLINGTON
730	AVON	AVON	034	Burrage	HANSON
632	AYER	AYER	054	Buzzards Bay	BOURNE
302	Ayers Village	HAVERHILL	339	Byfield	NEWBURY
002			555		NEWBORT
	В			С	
956	Baldwinville	TEMPLETON	600	CAMBRIDGE	CAMBRIDGE
311	Ballard Vale	ANDOVER	102	Camp Merrill	PITTSFIELD
576	Bancroft	MIDDLEFIELD	002	Campello	BROCKTON
900	Barbers	WORCESTER	711	CANTON	CANTON
021	BARNSTABLE	BARNSTABLE	672	CARLISLE	CARLISLE
932	BARRE	BARRE	933	Carters	BERLIN
234	Barrowsville	NORTON	030	CARVER	CARVER
062	Bass River	YARMOUTH	731	Caryville	BELLINGHAM
512	Bay State Village	NORTHAMPTON	050	Cataumet	BOURNE
322	Beach Bluff	SWAMPSCOTT	021	Centerville	BARNSTABLE
803	Beachmont	REVERE	240	Central Village	WESTPORT
171	BECKET	BECKET	472	CHARLEMONT	CHARLEMONT
633	BEDFORD	BEDFORD	715	Charles River Village	NEEDHAM
732	Beechwood	COHASSET	824	CHARLESTOWN	CHARLESTOWN (Bos)
530	BELCHERTOWN	BELCHERTOWN	936	CHARLTON	CHARLTON
731	BELLINGHAM	BELLINGHAM	234	Chartley	NORTON
611	BELMONT	BELMONT	051	CHATHAM	СНАТНАМ
231	BERKLEY	BERKLEY	051	Chathamport	CHATHAM
134	Berkshire	LANESBOROUGH	612	CHELMSFORD	CHELMSFORD

Last Revision Date: 01/01/2000

440 CHESTER CHESTERF 032 EAST BRIDGEWATER EAST HAM	Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
944 Cherry Valley LEICESTER 130 CHESTIRE CHESTER B24 East Boston 130 CHESTER CHESTER B24 East Boston 130 CHESTER CHESTER B24 East Boston 130 CHESTER CHESTER B32 EAST BRIDGEWATER EAST BROOK 140 CHICOPEE CHICOPEE GAT EAST BROOK EAST BROOK 131 CLARKSBURG CLARKSBURG 11 EAST DANK EAST DANK 131 CLARKSBURG CLARKSBURG 1212 EastonAlle EAST DANK 131 CLARKSBURG 122 EastonAlle EAST DANK 131 CLARKSBURG 122 EastonAlle EAST DANK 132 Ciffrondale SAUGUS 172 EOREMONT EGREMONT 232 Cohlandel SAUGUS 172 Elmison EDAAM 142 Cohlande WAYLAND 172 Elmison EDAAM 1431 Elmosod <t< th=""><th></th><th></th><th></th><th></th><th>F</th><th></th></t<>					F	
440 CHESTER CHESTER [032 EAST BRIDGEWATER EAST HAM EAST HAME EAST HAME <td></td> <td>Cherry Valley</td> <td></td> <td></td> <td></td> <td></td>		Cherry Valley				
570 CHESTERFIELD CHESTERFIELD 973 EAST BROOKFIELD EAST BROOKFIELD EAST BROOKFIELD EAST LONGMEADOW EAST LO					East Boston	CHARLESTOWN (Bos)
402 CHICOPEE CHICOPEE 441 EAST LONGMEADOW EAST LONGMEADOW 081 CHILMARK CHILMARK CHILMARK EASTHAM EASTHAM 014 Chiltonville PLYMOUTH 511 EASTHAM EASTHAM 131 CLARKSBURG CLARKSBURG 212 EASTHAM EASTHAM 131 CLARKSBURG CLARKSBURG 212 EASTHAM EASTHAM 200 Clifford NEW MARLBOROUCH 053 EDGARTOWN EASTHAM 200 Clifford NEW BEDFORD 172 EGREMONT EGREMONT 211 Clifford MEW BEDFORD 172 Elimewood CAST BRIDG 200 Clifford MEYETBRIDGEWATER 172 Elimewood EAST BRIDG 201 Coldspring OAKHAM 303 ESSEX ESSEX 203 Coldspring WESTFORD 032 Elmewood ERVING 201 FAILWAVEN FAILMOUTH FAILMOUTH FAILMOUTH FAILMOUTH FAILMOUT						EAST BRIDGEWATER
081 CHILMARK CHILMARK 082 EASTHAM EASTHAMPTON 014 Chitonvile PLYMOUTH EASTHAMPTON EASTHAMPTON 013 CLARKSBURG CLARKSBURG 212 EASTON EASTAMPTON 013 CLARKSBURG CLARKSBURG 212 EASTON EASTAMPTON 014 Chitonvile CLARKSBURG CLARKABURG EASTAMPTON EASTAMPTON 020 Clifford NEW BEDFORD 172 EGREMONT EGREMONT EGREMONT 021 Clifford MARBLEHEAD 172 EGREMONT EASTHAM 021 Cliffordale SAUGUS 712 Elifecton EASTHAMPTON 031 CORHASET COHASET 204 Egypt SCITUATE 032 Cohisost pring OAKHAM 233 ESVEX ESSEX 0330 ESSEX ESSEX ESSEX ESSEX 0330 ESSEX ESSEX ESSEX 0331 CORCORCORD 213 FAIRHAVEN						
014 Chiltonville PLYMOUTH 511 EASTHAMPTON EASTHAMPTON 739 City Mills NORFOLK 212 EASTON EASTON 718 ClarkSBURG CLARKSBURG 212 EASTON EASTON 718 Clarkon NEW MARLBOROUGH 053 EDGARTOWN EDGARTOWN 718 Clarkon NEW MARLBOROUGH 053 EDGARTOWN EDGARTOWN 710 Clifford NEW BEDPORD 172 EGREMONT EGREMONT 711 Clifford NEW BEDPORD 172 EGREMONT EGREMONT 711 Clifford NEW BEDPORD 1712 Elimode COLARIN 711 Clifford WEST BRIDGEWATER 1712 Elimode COLARIN 712 Cohdorok Spring OAKHAM 332 ERVING EAST BRIDG 712 Cohdorok Spring OAKHAM 333 ESSEX ESSEX 602 Coldspring WESTFORD 602 EVERETT 613 CORCORD CONCORD CONCARD 201 Fallware 614 Collineville NOUTHNICK 244 FALMOUTH FALMOUTH 616 Cove Landing HUDSON 191 Fallware						EAST LONGMEADOW
739 City Mills NÖRFÖLK 212 EASTON EASTON 131 CLARKSBURG CLARKSBURG CLARKSBURG 053 EDGARTOWN EDGARTOWN 121 Clement BARNSTABLE 053 EDGARTOWN EDGARTOWN 120 Clifford NEW MARLEOROUGH 172 EGREMONT EGREMONT EGREMONT 121 Cliftonal MARBLEHEAD 044 Egypt SCITUATE 121 Cliftonale SAUGUS 712 Elimovod EAST RNICG 121 Cliftonale WAYLAND CALASSET 433 ERVING ERVING 122 Cohdspring OAKHAM 300 ESSEX ESSEX ESSEX 650 Coldspring WENSFORD 602 EVERETT EVERETT <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td></t<>						
111 CLARKSBURG CLARKSBURG 212 Eastondale EASTON 1178 Clayton NEW MARLBOROUGH 603 E0GARTOWN EDOARTOWN 200 Clifford NEW BEOFORD 172 EGREMONT EGREMONT EGREMONT 210 Clifford MEW BEOFORD 172 EGREMONT EGREMONT EGREMONT 211 Cliffond MARLBORDAU 712 Elins DEDHAM 211 Cliffondale SAUGUS 712 Elins DEDHAM 212 Conductor WEST BRIDGEWATER 732 Envince COLRAIN 732 Conductor Kyring WESTFORD 602 EVERETT EVERETT 614 Coldinsville DRACUT 433 ERVING ESSEX 6131 CONCORD CONCORD CONCORD 213 FAIRHAVEN FAILRIVER 431 COLRAIN CONWAY CONWAY CONWAY CONWAY 211 FAILRIVER FALMOUTH 616 Cove Landing						
178 Clayton NEW MARLBOROUGH 053 EDGARTOWN EDGARTOWN 021 Clement BARNSTABLE 603 Edgeworth MALDEN 200 Clifford NEW BEDFORD 172 EGREMONT EGREMONT EGREMONT 316 Cliftonale SAUGUS 712 Ellis DEDHAM 911 CLINTON CLINTON CLINTON 431 Elmyrood EAST BRIDG 649 Cochiuste WAYLAND Edgwood EAST BRIDG 433 ERVING ERVING 722 Corhasset WAYLAND COARAN 300 ESSEX ESSEX 650 Coldspring WESTFORD 602 EVERETT EVERETT EVERETT 431 COLRAIN COLRAIN 402 Fairview CHICOPEE 433 613 COACORD CONWAY CONWAY 201 FALL RIVER FALL RIVER 616 Cove Landing HUDSON 913 Farlword GAAWAM 621						
021 Clement BARNSTABLE 603 Edgeworth MALDEN 020 Clifford NEV BEDFORD TZ EGREMONT EGREMONT 321 Clifford MARBLEHEAD 712 EGREMONT EGREMONT 321 Clifford SAUGUS 712 EGREMONT EGREMONT 441 Colnaine SAUGUS 712 Ellis DEDHAM 742 Colnaine WAYLAND 712 Endicott DEDHAM 742 Colnasstr COHASSET COHASSET EVERETT EVERETT 649 Cochitaute WESTFORD 602 EVERETT EVERETT 614 Collaspring WESTFORD 602 EVERETT EVERETT 614 Collaspring WESTFORD 602 FaltHAVEN FALRHAVEN 614 Collaspring WESTFORD 602 FaltHAVEN FALLRIVER 614 Collaspring WESTFORD 603 FaltHAVEN FALLRIVER 614 Coldspring						EASTON
200 Cilford NEW BEDFORD 172 EGREMONT EGREMONT EGREMONT 316 Ciliton MARBLEHEAD 044 Egypt SCITUATE 321 Cilitondale SAUGUS 712 Ellis DEDHAM 911 CLINTON CLINTON CLINTON COLRAIN 045 Cochessett WEST BRIDGEWATER 712 Endicott DEDHAM 712 Coldbrock Spring OKACHAM 330 ESSEX ESSEX 650 Coldspring WESTFORD 602 EVERETT EVERETT 614 Collariovs Spring ORACUT FAILRIVER FAILRIVER 613 CONCORD CONCORD 213 FAIRHAVEN FAILRIVER 614 Collaville SOUTHBOROUGH 201 FAILRIVER FALLRIVER 613 Condexville SOUTHBOROUGH 203 Fairview CHICOPEE 616 Cove Landing HUDSON 603 Fairview GRAFTON 621 Cotauti BARNSTABLE 913 Farmunsville GRAFTON 621 Cotauti BARNSTABLE 913 Fairview CHESHING 621 Cotauti BARNSTABLE 921 Fiorenee						
316 Citton MARBLEHEAD 044 Egypt SCITUATE 321 Cititonale SAUGUS 712 Ellis DEDHAM 321 Cititonale SAUGUS 712 Ellis DEDHAM 045 Cochessett WESTBRIDGEWATER 032 Elmycod EAST BRIDG 044 Cochituate WAYLAND 032 Elmycod EAST BRIDG 050 Coldbrook Spring OAKHAM 032 ESSEX ESSEX 650 Coldbrook Spring OAKHAM 030 ESSEX ESSEX 650 Coldbrook Spring OAKHAM 030 ESSEX ESSEX 650 Coldraville DRACUT 433 EARNA 662 EVERETT EVERETT 613 CONCORD CONCORD CAIL RIVER FALL RIVER FALL RIVER FALL RIVER 732 CONWAY CONUTHORON 603 FalkMOUTH FAIRHAVEN FAIRHAVEN FAIRHAVEN 742 Cradaville SAUTHADCH <						
321 Cilitondale SAUGUS 712 Ellis DEDHAM 911 CLINTON CLINTON CLINTON CALINTON 945 Cochessett WEST BRIDGEWATER 032 Elmyrove COLRAIN 946 Cochituate WAYLAND 712 Endicott DEDHAM 976 Coldbrock Spring OKHASSET 032 Elmwood EAST BRIDG 976 Coldbrock Spring OKHASSET 033 ESSEX ESSEX 614 Collapring WEST FORD 602 EVERETT EVERETT 613 CONCORD CONCORD CONCORD 213 FAIRHAVEN FAIRHAVEN 614 Cooleyville NEW SALEM 402 Fairview CHICOPEE 712 Cotaville SOUTHBOROUGH 130 Fairview CHICOPEE 712 Cotaville BARNSTABLE 913 Fairview CHICOPEE 714 Cummaquid BARNSTABLE 913 Fairview CHICOPEE 712 Cushing SALISBURY 621 Faiding Hills AGAWAM 712 Cushing SALISBURY 712 Findlen DEDHAM 714 Cushing SALISBURY 712 F						
911 CLINTON CLINTON COLRAIN 045 Cochituate WAYLAND 032 Elmwood EAST BRIDG 047 Cochituate WAYLAND 712 Endicott DEDHAM 732 COHASSET COHASSET 433 ERVING ERVING 650 Coldbrook Spring OAKHAM 300 ESSEX ESSEX ESSEX 6514 Collasville DRACUT 602 EVERETT EVERETT EVERETT 613 CONCORD CONCORD CONCORD 213 FAIRHAVEN FAIRHAVEN 431 Colleyville NEW SALEM 604 FALLRIVER FAILRIVER FAILRIVER 432 Codeyville NEW SALEM 604 FALMOUTH FAILMOUTH FAIRHAVEN 433 Colleyville BARNSTABLE 913 Fainumsville GRAFTON 021 Cotalman AMHERST 712 Finclenille NAUEN 034 Cutlynuk GOSNOLD 913 Fairwille SAUHAD 044 Cushman AMHERST 712 Finclenille<						
045 Cochessett WEST BRIDGEWATER 032 Elmwood EAST BRIDG 649 Cochitate WAYLAND 712 Endicott DEDHAM 732 COHASSET COHASSET 433 ERVING ERVING 976 Coldspring WESTFORD 602 EVERETT ESSEX ESSEX 650 Coldspring WESTFORD 602 EVERETT EVERETT EVERETT 614 Collspring WESTFORD 602 EVERETT ESSEX ESSEX 613 CORCORD CONCORD CONCORD 213 FAIRHAVEN FAIRHAVEN 444 Congamond SOUTHWICK 402 Fairwiew CHICOPEE 712 Cordavile SOUTHBOROUGH 433 Farley ERVING 616 Cove Landing HUDSON 913 Fairwille GRAFTON 021 Cutagville BARNSTABLE 913 Fairwille SOUTHBORG 021 Cutagville BARNSTABLE 913 Fi						
649 Cochituate WAYLAND 712 Endicott DEHAM 732 COHASSET COHASSET COHASSET 433 ERVING ERVING 976 Coldbrook Spring OAKHAM 330 ESSEX ESSEX 650 Coldbrook Spring WESTFORD 602 EVERETT EVERETT 614 Colinsville DRACUT 602 EVERETT EVERETT 613 CONCORD CONCORD 213 FAIRHAVEN FAIRHAVEN 444 Congamond SOUTHWICK 201 FALL RIVER FAIRHAVEN 443 Conleyville NEW SALEM 054 FALMOUTH FALMOUTH 450 Cordaville SOUTHBOROUGH 433 Farley ERVING 021 Cotait BARNSTABLE 913 Famumsville GRAFTON 021 Cotaigning SALISBURY 621 Falkner MALDEN 032 DALTON ALISBURY 621 Filorence NORHAMM 0342 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
732 COHASSET COHASSET 433 ERVING ERVING 976 Coldbrok Spring OAKHAM 330 ESSEX ESSEX 650 Coldspring WESTFORD 602 EVERETT EVERETT 614 Collinsville DRACUT FAIRHAVEN FAIRHAVEN FAIRHAVEN 613 CONCORD CONVAY CONWAY CONVAY CONVAY 430 Cooleyville NEW SALEM 433 Fairley FAILRIVER 440 Cordaville SOUTHBOROUGH 433 Fairley ERVING 921 Cotaville BARNSTABLE 913 Fairnumsville GRAFTON 921 Cotaville BARNSTABLE 922 Fayville SOUTHBORC 921 Cutylinig SALISBURY 712 Findlen DAFTON 921 Cutylnuk GOSNOLD 913 Fiskdale STURBRIDGE 922 Fairville GAWAM 621 Felchville NATICK 924 Fiskd						
976 Coldbrook Spring OAKHAM 660 Coldspring WESTFORD 614 Collinsville DRACUT 431 CONCORD CONCORD 613 CONCORD CONCORD 431 CONCORD CONCORD 433 CONWAY CONWAY 430 Cooleyville NEW SALEM 432 Cordaville SOUTHBOROUGH 433 Fairley ERVING 616 Cove Landing HUDSON 617 Cummaquid BARNSTABLE 021 Caidiner MALDEN 021 Coulmanaquid BARNSTABLE 021 Cummaquid BARNSTABLE 021 Cushing SALISBURY 621 Feeding Hills AGAWAM 632 Cushman AMHERST 033 DANVERS DANVERS 034 Cushman AMHERST 0312 DALTON DALTON 132 DALTON DALTON 133 DANVERS DANVERS 134 DANVERS <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
650 Coldspring WESTFORD 602 EVERETT EVERETT 614 Collinsville DRACUT F 613 CONCORD CONCORD 213 FAIRHAVEN FAIRHAVEN 613 CONCORD CONCORD 213 FAIRHAVEN FAIRHAVEN 444 Congamond SOUTHWICK 402 Fairview CHICOPEE 480 Cooleyville NEW SALEM 603 FAILRIVER FALL RIVER 952 Cordaville SOUTHBOROUGH 433 Farnhams CHESHIRE 021 Cotult BARNSTABLE 913 Farnhams CHESHIRE 021 Cummaquid BARNSTABLE 952 Fayville SOUTHBORC 021 Cushing SALISBURY 712 Finden DEDHAM 0342 Cutshinuk GOSNOLD 913 Fiskerville GRAFTON 044 Cutshinuk GOSNOLD 914 Fiskedale STURBRIDGE 132 DALTON DANVERS DANV						
614 Collinsville DRACUT 431 COLRAIN COLRAIN 613 CONCORD CONCORD 444 Congamond SOUTHWICK 473 CONWAY CONWAY 473 CONWAY CONWAY 473 CONWAY CONWAY 480 Cooleyville NEW SALEM 481 Codesynile SOUTHBOROUGH 482 Cordaville SOUTHBOROUGH 952 Cordaville SOUTHBOROUGH 951 Fanhams CHESHIRE 913 Fanumer MALDEN 921 Craigville BARNSTABLE 912 Cashing SALISBURY 616 Coushman AMHERST 911 Cushman AMHERST 912 Falker MAUER 913 Fishedale STURBRIDGE 914 Fishedale STURBRIDGE 915 Filden DEDHAM 084 Cuttyhunk GOSNOLD 914 Fishedale STURBRIDGE 91512 Florence<						
431 COLRAIN COLRAIN 613 CONCORD CONCORD 613 CONCORD CONCORD 614 Congamond SOUTHWICK 444 Conleyville NEW SALEM 450 Cooleyville NEW SALEM 480 Cooleyville NEW SALEM 952 Cordaville SOUTHBOROUGH 951 Cotuit BARNSTABLE 616 Cove Landing HUDSON 021 Craigville BARNSTABLE 913 Faulkner MALDEN 021 Cummaquid BARNSTABLE 9571 CUMMINGTON CUMMINGTON 021 Cushing SALISBURY 712 Findlen DEHAM 084 Cutyhunk GOSNOLD 913 DANVERS DANVERS 132 DALTON DALTON 133 DANVERS DANVERS 134 DAVERS DANVERS 135 DANVERS FALRIVEN 141 Davis ROWE 152 Florence				002		
613 CONCORD CONCORD 213 FAIRHAVEN FAILRAVEN 444 Congamond SOUTHWICK 402 Fairview CHICOPEE 473 CONWAY CANWOTH DSI FALLRIVER FALRIVAUN FALRIVEN GAUWAM GAUWAM GAUWAM GAUWAM GAUWAM GAUWAM					F	
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DEEDHERTOWN	530	Dwight	BELCHERTOWN		9	SOUTHBRIDGE GLOUCESTER

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
573	GOSHEN	GOSHEN	021	Hyannis	BARNSTABLE
084	GOSNOLD	GOSNOLD	021	Hyannisport	BARNSTABLE
913	GRAFTON	GRAFTON	818	HYDE PARK	HYDE PARK (Boston)
574	GRANBY	GRANBY			
650	Graniteville	WESTFORD		I	
492	GRANVILLE	GRANVILLE	400	Indian Orchard	SPRINGFIELD
111	GREAT BARRINGTON	GREAT BARRINGTON	403	Ingleside	HOLYOKE
039	Green Harbor	MARSHFIELD	138	Interlaken	STOCKBRIDGE
044	Greenbush	SCITUATE	315	IPSWICH	IPSWICH
900	Greendale	WORCESTER	031	Island Creek	DUXBURY
410	GREENFIELD	GREENFIELD	742	Islington	WESTWOOD
624	Greenwood	WAKEFIELD		J	
112	Greylock	NORTH ADAMS			
431	Griswoldville	COLRAIN	817	JAMAICA PLAIN	JAMAICA PLAIN (Bos)
636	GROTON	GROTON	940	Jefferson	HOLDEN
332	GROVELAND	GROVELAND		K	
	н		651	Kendall Green	WESTON
531	HADLEY	HADLEY	036	KINGSTON	KINGSTON
070	HALIFAX	HALIFAX		L	
333	HAMILTON	HAMILTON		—	
493	HAMPDEN	HAMPDEN	644	Lake Boon	STOW
174	HANCOCK	HANCOCK	411	Lake Pleasant	MONTAGUE
033	HANOVER	HANOVER	037	LAKEVILLE	LAKEVILLE
034	HANSON	HANSON	943	LANCASTER	LANCASTER
736	Harding	MEDFIELD	134	LANESBOROUGH	LANESBOROUGH
939	HARDWICK	HARDWICK	314	Lanesville	GLOUCESTER
178	Hartsville	NEW MARLBOROUGH	512	Laurel Park	NORTHAMPTON
974	HARVARD	HARVARD	303	LAWRENCE	LAWRENCE
055	HARWICH	HARWICH	135	LEE	LEE
055	Harwichport	HARWICH	512	Leeds	NORTHAMPTON
054	Hatchville	FALMOUTH	944	LEICESTER	LEICESTER
532	HATFIELD	HATFIELD	136	LENOX	LENOX
313	Hathorne	DANVERS	136	Lenoxdale	LENOX
302	HAVERHILL	HAVERHILL	914	LEOMINSTER	LEOMINSTER
475	HAWLEY	HAWLEY	477		
638	Hayden Row	HOPKINTON	617	LEXINGTON	LEXINGTON LEYDEN
534	Haydenville	WILLIAMSBURG	478	LEYDEN LINCOLN	LINCOLN
476	HEATH	HEATH	639		MALDEN
210	Hebronville	ATTLEBORO	603 917	Linden Linwood	NORTHBRIDGE
715	Highlandville	NEEDHAM	573	Linwood	GOSHEN
477	Hillsboro	LEVERETT	315	Little Neck	IPSWICH
012	HINGHAM	HINGHAM	640	LITTLETON	LITTLETON
133	HINSDALE	HINSDALE	484	Locks Village	WENDELL
735	HOLBROOK	HOLBROOK	230	Long Plain	ACUSHNET
940	HOLDEN	HOLDEN	442	LONGMEADOW	LONGMEADOW
494	HOLLAND	HOLLAND	054	Longview	FALMOUTH
637	HOLLISTON	HOLLISTON	953	Loring	STERLING
403 173	HOLYOKE	HOLYOKE FLORIDA	601	LOWELL	LOWELL
941	Hoosac Tunnel HOPEDALE	HOPEDALE	421	LUDLOW	LUDLOW
638	HOPEDALE	HOPEDALE	945	LUNENBURG	LUNENBURG
240	HOPKINTON Horseneck Beach	WESTPORT	300	LYNN	LYNN
240	Hortonville	SWANSEA	334	LYNNFIELD	LYNNFIELD
111	Housatonic	GREAT BARRINGTON	431	Lyonsville	COLRAIN
942	HUBBARDSTON	HUBBARDSTON			- ·
616	HUDSON	HUDSON		Μ	
035	HULL	HULL	314	Magnolia	GLOUCESTER
033	Humarock	SCITUATE	603	MALDEN	MALDEN
533	HUNTINGTON	HUNTINGTON	955	Manchaug	SUTTON
135	Hurlburt	LEE	335	MANCHESTER	MANCHESTER

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
930	Manns Crossing	ASHBURNHAM	338	NAHANT	NAHANT
014	Manomet	PLYMOUTH	035	Nantasket Beach	HULL
214	MANSFIELD	MANSFIELD	056	NANTUCKET	NANTUCKET
110	Maple Grove	ADAMS	650	Nashoba	WESTFORD
603	Maplewood	MALDEN	621	NATICK	NATICK
316	MARBLEHEAD	MARBLEHEAD	715	NEEDHAM	NEEDHAM
038	MARION	MARION	177	NEW ASHFORD	NEW ASHFORD
618	MARLBOROUGH	MARLBOROUGH	200	NEW BEDFORD	NEW BEDFORD
039	MARSHFIELD	MARSHFIELD	182	New Boston	SANDISFIELD
021	Marston Mills	BARNSTABLE	975	NEW BRAINTREE	NEW BRAINTREE
085	MASHPEE	MASHPEE	136	New Lenox	LENOX
045	Matfield	WEST BRIDGEWATER	178	NEW MARLBOROUGH	NEW MARLBOROUGH
819	Mattapan	DORCHESTER (Boston)	480	NEW SALEM	NEW SALEM
040	MATTAPOISETT	MATTAPOISETT	339	NEWBURY	NEWBURY
620	MAYNARD	MAYNARD	318	NEWBURYPORT	NEWBURYPORT
736	MEDFIELD	MEDFIELD	183	Newstate	SAVOY
604	MEDFORD	MEDFORD	605	NEWTON	NEWTON
737	MEDWAY	MEDWAY	136	Niagara	LENOX
054	Megansett	FALMOUTH	615	Nobscot	FRAMINGHAM
619	MELROSE	MELROSE	605	Nonantum	NEWTON
946	MENDON	MENDON	211	Nonquitt	DARTMOUTH
081	Menemsha	CHILMARK	739	NORFOLK	NORFOLK
425	Merrick	WEST SPRINGFIELD	703	Norfolk Downs	QUINCY
336	MERRIMAC	MERRIMAC	055	Norman	HARWICH
336	Merrimacport	MERRIMAC	112	NORTH ADAMS	NORTH ADAMS
637	Metcalfs	HOLLISTON	319	NORTH ANDOVER	NORTH ANDOVER
317	METHUEN	METHUEN	215	NORTH ATTLEBORO	NORTH ATTLEBORO
013	MIDDLEBOROUGH	MIDDLEBOROUGH	948	NORTH BROOKFIELD	NORTH BROOKFIELD
576	MIDDLEFIELD	MIDDLEFIELD	819	North Dorchester	DORCHESTER (Boston)
645	Middlesex	SUDBURY	641	NORTH READING	NORTH READING
337	MIDDLETON	MIDDLETON	039	North River	MARSHFIELD
731	Midland	BELLINGHAM	512	NORTHAMPTON	NORTHAMPTON
915	MILFORD	MILFORD	949	NORTHBOROUGH	NORTHBOROUGH
178	Mill River	NEW MARLBOROUGH	917	NORTHBRIDGE	NORTHBRIDGE
031	Millbrook	DUXBURY	434	NORTHFIELD	NORTHFIELD
916	MILLBURY	MILLBURY	234	NORTON	NORTON
411	Millers Falls	MONTAGUE	041	NORWELL	NORWELL
480	Millington	NEW SALEM	716	NORWOOD	NORWOOD
738	MILLIS	MILLIS	634	Nutting Lake	BILLERICA
947	MILLVILLE	MILLVILLE		0	
714	MILTON	MILTON	0.57	-	
044	Minot	SCITUATE	057	OAK BLUFFS	OAK BLUFFS
425	Mitteneague	WEST SPRINGFIELD	959	Oakdale	WEST BOYLSTON
479	MONROE	MONROE	976	OAKHAM	
479	Monroe Bridge	MONROE	039	Ocean Bluff	MARSHFIELD
422	MONSON	MONSON	239	Ocean Grove	SWANSEA
411	MONTAGUE	MONTAGUE	939	Old Furnace	
002	Montello	BROCKTON	215	Old Town	NORTH ATTLEBORO
175	MONTEREY	MONTEREY	016	Onset	WAREHAM
495	MONTGOMERY	MONTGOMERY	412	ORANGE	ORANGE
050	Monument Beach	BOURNE	058	ORLEANS	ORLEANS
477	Moores Corner	LEVERETT	021	Osterville	BARNSTABLE
086	Moorland	TRURO	179	OTIS	OTIS
971	Morningdale	BOYLSTON	956	Otter River	TEMPLETON
434	Mount Hermom	NORTHFIELD	950	OXFORD	OXFORD
511	Mount Tom	EASTHAMPTON		Р	
176	MOUNT WASHINGTON	MOUNT WASHINGTON	400		
231	Myricks	BERKLEY	423	PALMER	PALMER
	Ν		977	PAXTON	PAXTON PEABODY
050	-	WEATEODD	320	PEABODY	
650	Nabnasset	WESTFORD	577	PELHAM	PELHAM

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
042	PEMBROKE	PEMBROKE	021	Santuit	BARNSTABLE
642	PEPPERELL	PEPPERELL	321	SAUGUS	SAUGUS
033	Perry	HANOVER	913	Saundersville	GRAFTON
180	PERU	PERU	183	SAVOY	SAVOY
978	PETERSHAM	PETERSHAM	615	Saxonville	FRAMINGHAM
979	PHILLIPSTON	PHILLIPSTON	044	SCITUATE	SCITUATE
340	Pigeon Cove	ROCKPORT	011	Scotland	BRIDGEWATER
634	Pinehurst	BILLERICA	039	Sea View	MARSHFIELD
102	PITTSFIELD	PITTSFIELD	237	SEEKONK	SEEKONK
578	PLAINFIELD	PLAINFIELD	232	Segreganset	DIGHTON
740	PLAINVILLE	PLAINVILLE	741	SHARON	SHARON
055	Pleasant Lake	HARWICH	431	Shattuckville	COLRAIN
102	Plunkett	PITTSFIELD	634	Shawsheen	BILLERICA
014	PLYMOUTH	PLYMOUTH	311	Shawsheen Village	ANDOVER
071	PLYMPTON	PLYMPTON	137	SHEFFIELD	SHEFFIELD
050	Pocasset	BOURNE	435	SHELBURNE	SHELBURNE
711	Ponkapog	CANTON	743	Sheldonville	WRENTHAM
238	Pottersville	SOMERSET	674	SHERBORN	SHERBORN
312	Prides Crossing	BEVERLY	643	SHIRLEY	SHIRLEY
980	PRINCETON	PRINCETON	044	Shore Acres	SCITUATE
059	PROVINCETOWN	PROVINCETOWN	918	SHREWSBURY	SHREWSBURY
000	•		482	SHUTESBURY	SHUTESBURY
	Q		056	Siasconset	NANTUCKET
940	Quinapoxet	HOLDEN	036	Silver Lake	KINGSTON
703	QUINCY	QUINCY	403	Smiths Ferry	HOLYOKE
900	Quinsigamond	WORCESTER	238	SOMERSET	SOMERSET
054	Quisset	FALMOUTH	606	SOMERVILLE	SOMERVILLE
			823	SOUTH BOSTON	SOUTH BOSTON (Bos)
	R		819	South Dorchester	DORCHESTER (Boston)
717	RANDOLPH	RANDOLPH	513	SOUTH HADLEY	SOUTH HADLEY
235	RAYNHAM	RAYNHAM	434	South Vernon	NORTHFIELD
622	READING	READING	580	SOUTHAMPTON	SOUTHAMPTON
818	Readville	HYDE PARK (Boston)	952	SOUTHBOROUGH	SOUTHBOROUGH
236	REHOBOTH	REHOBOTH	919	SOUTHBRIDGE	SOUTHBRIDGE
110	Renfrew	ADAMS	178	Southfield	NEW MARLBOROUGH
803	REVERE	REVERE	952	Southville	SOUTHBOROUGH
181	RICHMOND	RICHMOND	444	SOUTHWICK	SOUTHWICK
181	Richmond Furnace	RICHMOND	920	SPENCER	SPENCER
582	Ringville	WORTHINGTON	400	SPRINGFIELD	SPRINGFIELD
044	Rivermoor	SCITUATE	703	Squantum	QUINCY
944	Rochdale	LEICESTER	011	State Farm	BRIDGEWATER
043	ROCHESTER	ROCHESTER	139	State Line	WEST STOCKBRIDGE
013	Rock	MIDDLEBOROUGH	953	STERLING	STERLING
015	ROCKLAND	ROCKLAND	953	Still River	HARVARD
340	ROCKPORT	ROCKPORT	138	STOCKBRIDGE	STOCKBRIDGE
816	ROSLINDALE	ROSLINDALE (Boston)	623	STOCKBRIDGE	STONEHAM
481	ROWE	ROWE	623	Stonybrook	WESTON
341	ROWLEY	ROWLEY		STOUGHTON	
820	ROXBURY	ROXBURY (Boston)	718		STOUGHTON
981	ROYALSTON	ROYALSTON	644	STOW	STOW STURBRIDGE
443	RUSSELL	RUSSELL	954	STURBRIDGE	
951	RUTLAND	RUTLAND	645	SUDBURY	SUDBURY
301			436	SUNDERLAND	SUNDERLAND
	S		955	SUTTON	SUTTON
050	Sagamore	BOURNE	322	SWAMPSCOTT	SWAMPSCOTT
304	SALEM	SALEM	239	SWANSEA	SWANSEA
304	SALISBURY	SALISBURY	571	Swift River	CUMMINGTON
342	Salisbury Point	AMESBURY	016	Swifts Beach	WAREHAM
044	Sandhills	SCITUATE		т	
182	SANDISFIELD	SANDISFIELD			
060	SANDISFIELD	SANDISFIELD	313	Tapleyville	DANVERS
000	SANDWICH	SANDWICH	202	TAUNTON	TAUNTON

Last Revision Date: 01/01/2000

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
054	Teaticket	FALMOUTH	425	WEST SPRINGFIELD	WEST SPRINGFIELD
956	TEMPLETON	TEMPLETON	139	WEST STOCKBRIDGE	WEST STOCKBRIDGE
646	TEWKSBURY	TEWKSBURY	088	WEST TISBURY	WEST TISBURY
943	Thayer	LANCASTER	923	WESTBOROUGH	WESTBOROUGH
423	Thorndike	PALMER	045	Westdale	WEST BRIDGEWATER
423	Three Rivers	PALMER	424	WESTFIELD	WESTFIELD
233	Thwaites	FREETOWN	650	WESTFORD	WESTFORD
061	TISBURY	TISBURY	581	WESTHAMPTON	WESTHAMPTON
011 496	Titicut TOLLAND	BRIDGEWATER TOLLAND	961 651	WESTMINSTER WESTON	WESTMINSTER WESTON
496 371	TOPSFIELD	TOPSFIELD	240	WESTPORT	WESTPORT
239	Touisset	SWANSEA	613	Westvale	CONCORD
647	TOWNSEND	TOWNSEND	742	WESTWOOD	WESTWOOD
016	Tremont	WAREHAM	721	WEYMOUTH	WEYMOUTH
086	TRURO	TRURO	437	WHATELY	WHATELY
412	Tully	ORANGE	939	Wheelwright	HARDWICK
411	Turners Falls	MONTAGUE	014	White Horse Beach	PLYMOUTH
648	TYNGSBOROUGH	TYNGSBOROUGH	932	White Valley	BARRE
184	TYRINGHAM	TYRINGHAM	921	Whitins	UXBRIDGE
	U		917	Whitinsville	NORTHBRIDGE
	-		017	WHITMAN	WHITMAN
713	Unionville	FRANKLIN	202	Whittenton	TAUNTON
957	UPTON	UPTON	021	Wianno	BARNSTABLE
921	UXBRIDGE	UXBRIDGE	445	WILBRAHAM	WILBRAHAM
	V		955	Wilkonsville	SUTTON
004	-	TIODUDY	054	Williams	FALMOUTH
061	Vineyard Haven	TISBURY	534	WILLIAMSBURG	WILLIAMSBURG
	W		140	WILLIAMSTOWN	WILLIAMSTOWN
605	Waban	NEWTON	942	Williamsville	HUBBARDSTON
624	WAKEFIELD	WAKEFIELD	402	Willimansett	CHICOPEE
497	WALES	WALES	511 652	Williston Mills	EASTHAMPTON WILMINGTON
719	WALPOLE	WALPOLE	924	WILMINGTON WINCHENDON	WINCHENDON
607	WALTHAM	WALTHAM	924 625	WINCHENDON	WINCHENDON
646	Wamesit	TEWKSBURY	186	WINDSOR	WINDSOR
054	Waquoit	FALMOUTH	716	Winslow	NORWOOD
302	Ward Hill	HAVERHILL	606	Winter Hill	SOMERVILLE
514	WARE	WARE	810	WINTHROP	WINTHROP
016	WAREHAM	WAREHAM	626	WOBURN	WOBURN
958	WARREN	WARREN	703	Wollaston	QUINCY
483	WARWICK	WARWICK	054	Woods Hole	FALMOUTH
185	WASHINGTON	WASHINGTON	737	Woodside	MEDWAY
934	Waterford	BLACKSTONE	638	Woodville	HOPKINTON
608	WATERTOWN	WATERTOWN	900	WORCESTER	WORCESTER
924	Waterville	WINCHENDON	443	Woronoco	RUSSELL
611			582	WORTHINGTON	WORTHINGTON
649 922	WAYLAND	WAYLAND WEBSTER	743	WRENTHAM	WRENTHAM
922 625	WEBSTER Wedgemere	WINCHESTER	619	Wyoming	MELROSE
202	Weir	TAUNTON		Y	
720	WELLESLEY	WELLESLEY	060		VARMOUTH
087	WELLFLEET	WELLFLEET	062	YARMOUTH	YARMOUTH YARMOUTH
604	Wellington	MEDFORD	062	Yarmouthport	TARIVIOUTH
484	WENDELL	WENDELL		Z	
343	WENHAM	WENHAM	472	Zoar	CHARLEMONT
959	WEST BOYLSTON	WEST BOYLSTON	110	Zylonite	ADAMS
045	WEST BRIDGEWATER	WEST BRIDGEWATER			1
960	WEST BROOKFIELD	WEST BROOKFIELD			
061	West Chop	TISBURY			
344	WEST NEWBURY	WEST NEWBURY			
815	WEST ROXBURY	WEST ROXBURY (Bos)			

Last Revision Date: 01/01/2000

PREMIUM TOWN CODE - ACCIDENT TOWN CODE

NUMERICAL LISTING

- 1. Cities and Towns are printed in Capital Letters.
- 2. Villages, Sections of Cities and Towns, and Local Designations are printed in Small Type with the name of the corresponding City or Town in the adjacent column.
- 3. Sections of Cities and Towns designated "North", "East", "South" and "West" or with a prefix or suffix that is merely supplemental to the principal name (such as West Newton or Arlington Heights) are not separately listed (see principal designation). In some instances there are two distinct townships, such as Reading and North Reading, in which case both towns are listed.
- 4. Counties are indicated by code, using the first position of the Town Code as follows:

First Position	County	First Position	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

 \bigstar 5. The City of Boston is divided into sections as follows:

City of Boston					
Definition	ZIP Code	Statistical Code			
BOSTON CENTRAL	02108-02111, 02113-02116, 02118, 02133, 02199, 02201, 02203, 02210, 02215, 02222, 02241	821			
BRIGHTON	02134, 02135, 02163	822			
CHARLESTOWN-EAST BOSTON	02128, 02129	824			
DORCHESTER	02122, 02124, 02125, 02126	819			
HYDE PARK	02136	818			
JAMAICA PLAIN	02130	817			
ROSLINDALE	02131	816			
ROXBURY	02119, 02120, 02121	820			
SOUTH BOSTON	02127	823			
WEST ROXBURY	02132	815			

6. The appropriate Out of State Town Codes are as follows:

Location	Code
Connecticut	991
Maine	992
New Hampshire	993
New York	994
Rhode Island	995
Vermont	996
Other	999

Last Revision Date: 01/01/2016

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
002	BROCKTON	BROCKTON	041	NORWELL	Accord
		Campello	042	PEMBROKE	PEMBROKE
		Montello			Bryantville
010	ABINGTON	ABINGTON	043	ROCHESTER	RÓCHESTER
011	BRIDGEWATER	BRIDGEWATER	044	SCITUATE	SCITUATE
011	BRIDGERMEIN	Scotland	0.1		Egypt
		State Farm			Greenbush
		Titicut			Humarock
012	HINGHAM	HINGHAM			Minot
012	MIDDLEBOROUGH	MIDDLEBOROUGH			Rivermoor
015	MIDDLEBOROUGH				Sandhills
04.4		Rock			
014	PLYMOUTH	PLYMOUTH			Shore Acres
	Chiltonville 045 WEST BRIDGEWATER	WEST BRIDGEWATER			
		Manomet			Cochessett
		White Horse Beach			Matfield
015	ROCKLAND	ROCKLAND			Westdale
016	WAREHAM	WAREHAM	050	BOURNE	BOURNE
		Onset			Bournedale
		Swifts Beach			Buzzards Bay
		Tremont			Cataumet
017	WHITMAN	WHITMAN			Monument Beach
021	BARNSTABLE	BARNSTABLE			Pocasset
021	BARRIOTABLE	Centerville			Sagamore
		Clement	051	СНАТНАМ	CHATHAM
		Cotuit	CHATHAM	Chathamport	
		Craigville	052	DENNIS	DENNIS
004			052	DEININIS	
021	BARNSTABLE	Cummaquid	050		Dennisport
		Hyannis	053 054	EDGARTOWN	EDGARTOWN
		Hyannisport		FALMOUTH	FALMOUTH
		Marston Mills			Hatchville
		Osterville			Longview
		Santuit			Megansett
		Wianno			Quisset
030	CARVER	CARVER			Teaticket
031	DUXBURY	DUXBURY			Waquoit
		Island Creek			Williams
		Millbrook			Woods Hole
032	EAST BRIDGEWATER	EAST BRIDGEWATER	055	HARWICH	HARWICH
		Elmwood			Harwichport
033	HANOVER	HANOVER			Norman
000	The work of the second s	Assinippi			Pleasant Lake
		Perry	056	NANTUCKET	NANTUCKET
034	HANSON	HANSON	030	NANTOCKET	
034	HANSON		057		Siasconset
005		Burrage	057	OAK BLUFFS	OAK BLUFFS
035	HULL	HULL	058	ORLEANS	ORLEANS
		Allerton	059	PROVINCETOWN	PROVINCETOWN
		Nantasket Beach	060	SANDWICH	SANDWICH
036	KINGSTON	KINGSTON			Forestdale
		Silver Lake	061	TISBURY	TISBURY
037	LAKEVILLE	LAKEVILLE			Vineyard Haven
038	MARION	MARION			West Chop
039	MARSHFIELD	MARSHFIELD	062	YARMOUTH	YARMOUTH
		Brant Rock			Bass River
		Green Harbor			Yarmouthport
		North River	070	HALIFAX	HALIFAX
		Ocean Bluff	070	PLYMPTON	PLYMPTON
				BREWSTER	BREWSTER
0.40	MATTADOLOGTT	Sea View	080		
040	MATTAPOISETT	MATTAPOISETT	081	CHILMARK	CHILMARK
0.11		Antassawamock Neck			Menemsha
041	NORWELL	NORWELL	082	EASTHAM	EASTHAM

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
083	GAY HEAD	GAY HEAD	182	SANDISFIELD	SANDISFIELD
084	GOSNOLD	GOSNOLD	102	O, WEIGH IEED	New Boston
004	GOGINOLD	Cuttyhunk	183	SAVOY	SAVOY
085	MASHPEE	MASHPEE	105	34/01	Brier
085	TRURO	TRURO			Newstate
000	IKUKU	Moorland	184	TYRINGHAM	TYRINGHAM
0.07					
087	WELLFLEET	WELLFLEET	185	WASHINGTON	WASHINGTON
088	WEST TISBURY	WEST TISBURY	186	WINDSOR	WINDSOR
102	PITTSFIELD	PITTSFIELD	200	NEW BEDFORD	NEW BEDFORD
		Camp Merrill			Clifford
		Plunkett	201	FALL RIVER	FALL RIVER
110	ADAMS	ADAMS			Bowenville
		Maple Grove			Flint
		Renfrew	202	TAUNTON	TAUNTON
		Zylonite			Weir
111	GREAT BARRINGTON	GREAT BARRINGTON			Whittenton
		Housatonic	210	ATTLEBORO	ATTLEBORO
112	NORTH ADAMS	NORTH ADAMS		-	Dodgeville
		Blackington	1		Hebronville
		Greylock	211	DARTMOUTH	DARTMOUTH
130	CHESHIRE	CHESHIRE	211	DAITIMOUTH	Nonquitt
130	CHESHIKE	Farnhams	212	EASTON	EASTON
4.04	CLARKSBURG	CLARKSBURG	212	EASTON	
131	CLARKSBURG		0.10		Eastondale
		Briggsville	213	FAIRHAVEN	FAIRHAVEN
132	DALTON	DALTON	214	MANSFIELD	MANSFIELD
133	HINSDALE	HINSDALE	215	NORTH ATTLEBORO	NORTH ATTLEBORO
134	LANESBOROUGH	LANESBOROUGH			Adamsdale
		Berkshire			Attleboro Falls
135	LEE	LEE			Old Town
		Hurlburt	230	ACUSHNET	ACUSHNET
136	LENOX	LENOX			Long Plain
	-	Lenoxdale	231	BERKLEY	BERKLEY
		New Lenox	_		Myricks
		Niagara	232	DIGHTON	DIGHTON
137	SHEFFIELD	SHEFFIELD	202	Diomon	Segreganset
107	SHET TEED	Ashley Falls	233	FREETOWN	FREETOWN
138	STOCKBRIDGE	STOCKBRIDGE	200	TREETOWN	Assonet
150	STOCKBRIDGE	Glendale			Thwaites
			234	NORTON	NORTON
120	WEST STOCKBRIDGE	Interlaken	234	NORTON	
139	WEST STOCKBRIDGE	WEST STOCKBRIDGE			Barrowsville
		State Line		5.0.0.0.0.0	Chartley
140	WILLIAMSTOWN	WILLIAMSTOWN	235	RAYNHAM	RAYNHAM
170	ALFORD	ALFORD	236	REHOBOTH	REHOBOTH
171	BECKET	BECKET	237	SEEKONK	SEEKONK
172	EGREMONT	EGREMONT	238	SOMERSET	SOMERSET
173	FLORIDA	FLORIDA			Pottersville
		Drury	239	SWANSEA	SWANSEA
		Hoosac Tunnel	1		Hortonville
174	HANCOCK	HANCOCK	1		Ocean Grove
175	MONTEREY	MONTEREY	1		Touisset
176	MOUNT WASHINGTON	MOUNT WASHINGTON	240	WESTPORT	WESTPORT
170	NEW ASHFORD	NEW ASHFORD	270		Acoaxet
178	NEW MARLBOROUGH				
1/0	NEW WARLDURUUGH	NEW MARLBOROUGH	1		Central Village
		Clayton	000		Horseneck Beach
		Hartsville	300	LYNN	LYNN
		Mill River	302	HAVERHILL	HAVERHILL
		Southfield	1		Ayers Village
179	OTIS	OTIS	1		Bradford
180	PERU	PERU			Ward Hill
181	RICHMOND	RICHMOND	303	LAWRENCE	LAWRENCE
	1	Richmond Furnace	304	SALEM	SALEM

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
310	AMESBURY	AMESBURY	411	MONTAGUE	Lake Pleasant
010	, wiebbertti	Salisbury Point			Millers Falls
311	ANDOVER	ANDOVER			Turners Falls
0		Ballard Vale	412	ORANGE	ORANGE
		Frye Village		ONUNCE	Tully
		Shawsheen Village	420	AGAWAM	AGAWAM
312	BEVERLY	BEVERLY	420		Feeding Hills
512	DEVENEI	Prides Crossing	421	LUDLOW	LUDLOW
313	DANVERS	DANVERS	422	MONSON	MONSON
010	Britterio	Danversport	423	PALMER	PALMER
		Hathorne	420	1 / LIVIEI	Bondsville
		Tapleyville			Thorndike
314	GLOUCESTER	GLOUCESTER			Three Rivers
514	GLOUCESTER	Annisquam	424	WESTFIELD	WESTFIELD
		Lanesville	425	WEST SPRINGFIELD	WEST SPRINGFIELD
0.45		Magnolia			Merrick
315	IPSWICH	IPSWICH	400		Mitteneague
040		Little Neck	430	BUCKLAND	BUCKLAND
316	MARBLEHEAD	MARBLEHEAD	431	COLRAIN	COLRAIN
		Clifton			Adamsville
317	METHUEN	METHUEN			Elmgrove
318	NEWBURYPORT	NEWBURYPORT			Griswoldville
319	NORTH ANDOVER	NORTH ANDOVER			Lyonsville
320	PEABODY	PEABODY			Shattuckville
321	SAUGUS	SAUGUS	432	DEERFIELD	DEERFIELD
		Cliftondale	433	ERVING	ERVING
322	SWAMPSCOTT	SWAMPSCOTT			Farley
		Beach Bluff	434	NORTHFIELD	NORTHFIELD
330	ESSEX	ESSEX			Mount Hermom
331	GEORGETOWN	GEORGETOWN			South Vernon
332	GROVELAND	GROVELAND	435	SHELBURNE	SHELBURNE
333	HAMILTON	HAMILTON	436	SUNDERLAND	SUNDERLAND
		Asbury Grove	437	WHATELY	WHATELY
334	LYNNFIELD	LYNNFIELD	440	CHESTER	CHESTER
335	MANCHESTER	MANCHESTER	441	EAST LONGMEADOW	EAST LONGMEADOW
336	MERRIMAC	MERRIMAC	442	LONGMEADOW	LONGMEADOW
		Merrimacport	443	RUSSELL	RUSSELL
337	MIDDLETON	MIDDLETON			Woronoco
338	NAHANT	NAHANT	444	SOUTHWICK	SOUTHWICK
339	NEWBURY	NEWBURY			Congamond
		Byfield	445	WILBRAHAM	WILBRAHAM
340	ROCKPORT	ROCKPORT	470	ASHFIELD	ASHFIELD
		Pigeon Cove	471	BERNARDSTON	BERNARDSTON
341	ROWLEY	ROWLEY	472	CHARLEMONT	CHARLEMONT
342	SALISBURY	SALISBURY			Zoar
0 12		Cushing	473	CONWAY	CONWAY
343	WENHAM	WENHAM	473	GILL	GILL
343	WEST NEWBURY	WEST NEWBURY	474	HAWLEY	HAWLEY
370	BOXFORD	BOXFORD	475	HEATH	HEATH
370	TOPSFIELD	TOPSFIELD	470		Dell
		SPRINGFIELD	477		
400	SPRINGFIELD		477	LEVERETT	LEVERETT
		Brightwood			Hillsboro
400	01100055	Indian Orchard			Moores Corner
402	CHICOPEE	CHICOPEE	478	LEYDEN	LEYDEN
		Fairview	479	MONROE	MONROE
		Willimansett			Monroe Bridge
403	HOLYOKE	HOLYOKE	480	NEW SALEM	NEW SALEM
		Ingleside			Cooleyville
		Smiths Ferry			Millington
410	GREENFIELD	GREENFIELD	481	ROWE	ROWE
411	MONTAGUE	MONTAGUE			Davis

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
482	SHUTESBURY	SHUTESBURY	606	SOMERVILLE	SOMERVILLE
483	WARWICK	WARWICK			Winter Hill
484	WENDELL	WENDELL	607	WALTHAM	WALTHAM
		Locks Village	608	WATERTOWN	WATERTOWN
490	BLANDFORD	BLANDFORD	610	ARLINGTON	ARLINGTON
491	BRIMFIELD	BRIMFIELD	611	BELMONT	BELMONT
492	GRANVILLE	GRANVILLE			Waverley
493	HAMPDEN	HAMPDEN	612	CHELMSFORD	CHELMSFORD
494	HOLLAND	HOLLAND	613	CONCORD	CONCORD
495	MONTGOMERY	MONTGOMERY			Westvale
496	TOLLAND	TOLLAND	614	DRACUT	DRACUT
497	WALES	WALES			Collinsville
510	AMHERST	AMHERST	615	FRAMINGHAM	FRAMINGHAM
		Cushman			Nobscot
511	EASTHAMPTON	EASTHAMPTON			Saxonville
		Mount Tom	616	HUDSON	HUDSON
		Williston Mills			Cove Landing
512	NORTHAMPTON	NORTHAMPTON	617	LEXINGTON	LEXINGTON
		Bay State Village	618	MARLBOROUGH	MARLBOROUGH
		Florence	619	MELROSE	MELROSE
		Laurel Park			Wyoming
		Leeds	620	MAYNARD	MAYNARD
513	SOUTH HADLEY	SOUTH HADLEY	621	NATICK	NATICK
514	WARE	WARE			Felchville
530	BELCHERTOWN	BELCHERTOWN	622	READING	READING
		Dwight	623	STONEHAM	STONEHAM
531	HADLEY	HADLEY	624	WAKEFIELD	WAKEFIELD
532	HATFIELD	HATFIELD			Greenwood
		Bradstreet	625	WINCHESTER	WINCHESTER
533	HUNTINGTON	HUNTINGTON			Wedgemere
534	WILLIAMSBURG	WILLIAMSBURG	626	WOBURN	WOBURN
		Haydenville	630	ACTON	ACTON
570	CHESTERFIELD	CHESTERFIELD	631	ASHLAND	ASHLAND
571	CUMMINGTON	CUMMINGTON	632	AYER	AYER
		Swift River	633	BEDFORD	BEDFORD
573	GOSHEN	GOSHEN	634	BILLERICA	BILLERICA
		Lithia			Nutting Lake
574	GRANBY	GRANBY			Pinehurst
576	MIDDLEFIELD	MIDDLEFIELD			Shawsheen
		Bancroft	635	BURLINGTON	BURLINGTON
577	PELHAM	PELHAM	636	GROTON	GROTON
578	PLAINFIELD	PLAINFIELD	637	HOLLISTON	HOLLISTON
580	SOUTHAMPTON	SOUTHAMPTON			Braggville
581	WESTHAMPTON	WESTHAMPTON			Metcalfs
582	WORTHINGTON	WORTHINGTON	638	HOPKINTON	HOPKINTON
		Ringville			Hayden Row
600	CAMBRIDGE	CAMBRIDGE			Woodville
601	LOWELL	LOWELL	639	LINCOLN	LINCOLN
602	EVERETT	EVERETT	640	LITTLETON	LITTLETON
603	MALDEN	MALDEN	641	NORTH READING	NORTH READING
		Edgeworth	642	PEPPERELL	PEPPERELL
		Faulkner	643	SHIRLEY	SHIRLEY
		Linden	644	STOW	STOW
		Maplewood			Gleasondale
604	MEDFORD	MEDFORD			Lake Boon
		Glenwood	645	SUDBURY	SUDBURY
		Wellington			Middlesex
605	NEWTON	NEWTON	646	TEWKSBURY	TEWKSBURY
		Auburndale			Wamesit
		Nonantum	647	TOWNSEND	TOWNSEND
		Waban	648	TYNGSBOROUGH	TYNGSBOROUGH

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
649	WAYLAND	WAYLAND	739	NORFOLK	NORFOLK
040		Cochituate	100	Nora CER	City Mills
650	WESTFORD	WESTFORD	740	PLAINVILLE	PLAINVILLE
		Coldspring	741	SHARON	SHARON
		Forge Village	742	WESTWOOD	WESTWOOD
		Graniteville			Islington
		Nabnasset	743	WRENTHAM	WRENTHAM
		Nashoba			Sheldonville
651	WESTON	WESTON	802	CHELSEA	CHELSEA
		Kendall Green	803	REVERE	REVERE
		Stonybrook			Beachmont
652	WILMINGTON	WILMINGTON	810	WINTHROP	WINTHROP
670	ASHBY	ASHBY	815	WEST ROXBURY (Bos)	WEST ROXBURY
671	BOXBOROUGH	BOXBOROUGH	816	ROSLINDALE (Boston)	ROSLINDALE
672	CARLISLE	CARLISLE	817	JAMAICA PLAIN (Bos)	JAMAICA PLAIN
673	DUNSTABLE	DUNSTABLE	818	HYDE PARK (Boston)	HYDE PARK
674	SHERBORN	SHERBORN			Readville
702	BROOKLINE	BROOKLINE	819	DORCHESTER	DORCHESTER
703	QUINCY	QUINCY		(Boston)	Mattapan
		Atlantic			North Dorchester
		Norfolk Downs			South Dorchester
		Squantum	820	ROXBURY (Boston)	ROXBURY
703	QUINCY	Wollaston	821	BOSTON (Central)	BOSTON (Central)
710	BRAINTREE	BRAINTREE	822	BRIGHTON (Boston)	BRIGHTON
711	CANTON	CANTON		, , , , , , , , , , , , , , , , , , ,	Allston
		Ponkapog	823	SOUTH BOSTON (Bos)	SOUTH BOSTON
712	DEDHAM	DEDHAM	824	CHARLESTOWN	CHARLESTOWN
		Ashcroft		(Boston)	East Boston
		Ellis	900	WORCESTER	WORCESTER
		Endicott			Barbers
		Findlen			Greendale
713	FRANKLIN	FRANKLIN			Quinsigamond
		Unionville	902	FITCHBURG	FITCHBURG
714	MILTON	MILTON	910	ATHOL	ATHOL
715	NEEDHAM	NEEDHAM	911	CLINTON	CLINTON
		Avery	912	GARDNER	GARDNER
		Charles River Village	913	GRAFTON	GRAFTON
		Highlandville			Farnumsville
716	NORWOOD	NORWOOD			Fisherville
		Winslow			Saundersville
717	RANDOLPH	RANDOLPH	914	LEOMINSTER	LEOMINSTER
718	STOUGHTON	STOUGHTON	915	MILFORD	MILFORD
719	WALPOLE	WALPOLE	916	MILLBURY	MILLBURY
		Bird Mills	917	NORTHBRIDGE	NORTHBRIDGE
720	WELLESLEY	WELLESLEY			Linwood
721	WEYMOUTH	WEYMOUTH			Whitinsville
730	AVON	AVON	918	SHREWSBURY	SHREWSBURY
731	BELLINGHAM	BELLINGHAM	919	SOUTHBRIDGE	SOUTHBRIDGE
		Caryville			Globe Village
		Midland	920	SPENCER	SPENCER
732	COHASSET	COHASSET	921	UXBRIDGE	UXBRIDGE
		Beechwood			Whitins
733	DOVER	DOVER	922	WEBSTER	WEBSTER
734	FOXBOROUGH	FOXBOROUGH	923	WESTBOROUGH	WESTBOROUGH
735	HOLBROOK	HOLBROOK	924	WINCHENDON	WINCHENDON
		Brookville			Waterville
736	MEDFIELD	MEDFIELD	930	ASHBURNHAM	ASHBURNHAM
		Harding			Manns Crossing
737	MEDWAY	MEDWAY	931	AUBURN	AUBURN
76.0		Woodside	932	BARRE	BARRE
738	MILLIS	MILLIS			White Valley

Last Revision Date: 01/01/2000

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
933	BERLIN	BERLIN			Wilkonsville
		Carters	956	TEMPLETON	TEMPLETON
934	BLACKSTONE	BLACKSTONE		_	Baldwinville
		Waterford			Otter River
935	BROOKFIELD	BROOKFIELD	957	UPTON	UPTON
936	CHARLTON	CHARLTON	958	WARREN	WARREN
		Dodge	959	WEST BOYLSTON	WEST BOYLSTON
937	DOUGLAS	DOŬGLAS			Oakdale
938	DUDLEY	DUDLEY	960	WEST BROOKFIELD	WEST BROOKFIELD
939	HARDWICK	HARDWICK	961	WESTMINSTER	WESTMINSTER
	_	Furnace	970	BOLTON	BOLTON
		Gilbertville	971	BOYLSTON	BOYLSTON
		Old Furnace	071	DOTECTOR	Morningdale
		Wheelwright	973	EAST BROOKFIELD	EAST BROOKFIELD
940	HOLDEN	HOLDEN	974	HARVARD	HARVARD
0.0		Jefferson	574	HAIWARD	Still River
		Quinapoxet	975	NEW BRAINTREE	NEW BRAINTREE
941	HOPEDALE	HOPEDALE	976	OAKHAM	OAKHAM
942	HUBBARDSTON	HUBBARDSTON	570	O A N I A M	Coldbrook Spring
•		Williamsville	977	PAXTON	PAXTON
943	LANCASTER	LANCASTER	978	PETERSHAM	PETERSHAM
0.0		Thayer	979	PHILLIPSTON	PHILLIPSTON
944	LEICESTER	LEICESTER	980	PRINCETON	PRINCETON
011	LEIGEGIEIX	Cherry Valley	981	ROYALSTON	ROYALSTON
		Rochdale	501		
945	LUNENBURG	LUNENBURG		OUT OF STATE T	OWN CODES
946	MENDON	MENDON	991	CONNECTICUT	
947	MILLVILLE	MILLVILLE	992	MAINE	
948	NORTH BROOKFIELD	NORTH BROOKFIELD	993	NEW HAMPSHIRE	
949	NORTHBOROUGH	NORTHBOROUGH	994	NEW YORK	
950	OXFORD	OXFORD	995	RHODE ISLAND	
951	RUTLAND	RUTLAND	996	VERMONT	
952	SOUTHBOROUGH	SOUTHBOROUGH	999	OTHER	
002	Coortibercooorti	Cordaville	P	1	
		Fayville			
		Southville			
953	STERLING	STERLING			
300		Loring			
954	STURBRIDGE	STURBRIDGE			
304		Fiskdale			
955	SUTTON	SUTTON			
900		Manchaug			