

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 1

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	182	318	200	594	314	535	283	177
PART 2	PERSONAL INJURY PROTECTION							
	100	140	140	242	140	218	126	109
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	222	370	291	716	463	644	417
	10,000	275	459	361	888	574	799	517
	15,000	278	464	365	898	581	808	523
	25,000	281	469	369	908	587	817	529
	35,000	284	473	372	916	592	824	533
	50,000	286	477	375	924	597	831	538
	100,000	289	481	378	931	602	837	542
	250,000	293	488	384	944	611	849	550
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	20	45	29	71	41	64	37
	20/50	22	49	31	78	45	70	40
	25/50	32	67	43	111	62	100	56
	25/60	34	70	45	118	66	106	59
	35/80	56	110	70	191	105	172	95
	50/100	79	150	95	264	144	238	130
	100/300	135	252	160	450	243	405	219
	250/500	254	466	295	842	453	759	408

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	499	907	545	1657	915	1491	824	494
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	161	161	161	161	161	161	161	161
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
70	127	76	232	128	209	115	69	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 2

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	197	348	229	647	355	582	320	192
PART 2	PERSONAL INJURY PROTECTION							
	101	149	149	256	151	230	136	109
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	260	406	312	796	481	716	433
	10,000	322	503	387	987	596	888	537
	15,000	326	509	391	998	603	898	543
	25,000	330	515	396	1009	610	908	549
	35,000	333	519	399	1018	615	916	554
	50,000	335	524	402	1027	620	924	559
	100,000	338	528	406	1035	625	931	563
	250,000	343	536	412	1050	634	944	571
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	21	48	34	79	43	71	39
	20/50	23	52	37	86	47	78	43
	25/50	34	72	50	123	67	110	61
	25/60	36	76	52	130	71	117	64
	35/80	60	119	81	210	115	189	104
	50/100	84	163	110	290	158	260	143
	100/300	145	274	184	493	270	443	244
	250/500	274	507	339	921	505	828	455

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	471	907	540	1705	852	1535	767	516
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	158	158	158	158	158	158	158	158
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
66	127	76	239	119	215	107	72	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 3

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	219	364	260	736	398	662	358	207
PART 2	PERSONAL INJURY PROTECTION							
	120	162	162	287	167	258	150	128
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	270	422	331	806	570	725	513
	10,000	335	523	410	999	707	899	636
	15,000	339	529	415	1011	715	909	643
	25,000	342	535	420	1022	723	919	650
	35,000	345	540	423	1031	729	927	656
	50,000	348	544	427	1040	735	935	662
	100,000	351	549	430	1048	741	943	667
	250,000	356	557	437	1063	752	956	677
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	23	50	35	88	53	79	48
	20/50	25	54	38	96	58	86	52
	25/50	38	75	53	137	80	123	72
	25/60	40	79	56	146	85	131	76
	35/80	67	125	88	236	134	212	121
	50/100	93	170	121	327	184	294	166
	100/300	161	286	203	558	310	501	279
	250/500	304	530	377	1044	576	939	519

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	528	1018	654	1863	1000	1677	900	527
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	171	171	171	171	171	171	171	171
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
74	143	92	261	140	235	126	74	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 4

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	246	404	281	853	484	768	436	230
PART 2	PERSONAL INJURY PROTECTION							
	127	170	170	325	197	293	177	137
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	273	415	309	839	534	755	481
	10,000	339	515	383	1040	662	936	596
	15,000	342	520	387	1052	670	947	603
	25,000	346	526	392	1064	677	957	610
	35,000	349	531	395	1073	683	966	615
	50,000	352	535	399	1082	689	974	620
	100,000	355	540	402	1091	694	982	625
	250,000	360	547	408	1107	704	996	634
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	25	58	40	102	61	92	55
	20/50	28	63	43	112	66	101	60
	25/50	41	86	59	159	94	144	84
	25/60	44	90	62	169	99	152	89
	35/80	74	141	98	274	159	247	143
	50/100	104	192	133	379	219	341	197
	100/300	179	321	223	646	372	582	335
	250/500	339	594	412	1210	693	1090	625

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	551	1088	681	1980	1061	1782	955	522
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	160	160	160	160	160	160	160	160
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
77	152	95	277	149	249	134	73	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

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MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 5

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	251	402	316	896	518	806	466	250
PART 2	PERSONAL INJURY PROTECTION							
	129	171	171	336	200	302	180	140
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	289	435	341	865	555	779	293
	10,000	358	539	423	1073	688	966	363
	15,000	362	545	428	1085	696	977	367
	25,000	366	552	432	1097	704	988	372
	35,000	370	556	436	1106	710	996	375
	50,000	373	561	440	1116	716	1005	378
	100,000	376	566	443	1125	722	1013	381
	250,000	381	574	450	1141	732	1028	386
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	25	56	43	107	64	96	28
	20/50	28	61	47	117	70	105	31
	25/50	42	83	65	167	99	150	45
	25/60	44	88	68	177	105	159	47
	35/80	75	138	108	288	169	258	78
	50/100	105	189	147	398	233	358	109
	100/300	182	317	248	679	396	610	186
	250/500	345	587	459	1270	739	1142	350

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		0	
	20/50		34		0	
	25/50		35		2	
	25/60		37		2	
	35/80		40		6	
	50/100		43		11	
	100/300		50		27	
	250/500		62		95	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	557	998	605	1762	1049	1586	944	527
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	174	174	174	174	174	174	174	174
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
78	140	85	247	147	222	132	74	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

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MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 6

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	274	469	312	961	591	865	532	258
PART 2	PERSONAL INJURY PROTECTION							
	135	193	193	366	224	329	202	146
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	289	423	338	887	590	798	531
	10,000	358	525	419	1100	732	990	658
	15,000	362	530	424	1112	740	1001	666
	25,000	366	536	429	1125	748	1012	673
	35,000	370	541	432	1134	755	1021	679
	50,000	373	546	436	1144	761	1029	685
	100,000	376	550	439	1153	767	1037	690
	250,000	381	558	446	1170	778	1053	700
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	25	66	43	113	75	102	68
	20/50	28	71	47	124	82	112	74
	25/50	43	98	64	177	115	160	104
	25/60	46	103	68	188	122	170	110
	35/80	79	162	107	306	195	276	176
	50/100	112	221	146	424	268	382	242
	100/300	195	371	245	725	455	653	410
	250/500	372	687	455	1359	848	1224	764

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	594	1136	683	1935	1140	1742	1026	559
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	180	180	180	180	180	180	180	180
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
83	159	96	271	160	244	144	78	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 7

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	260	432	320	976	576	878	518	251
PART 2	PERSONAL INJURY PROTECTION							
	132	205	205	363	218	327	196	141
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	322	494	405	916	632	824	569
	10,000	399	613	502	1136	784	1022	706
	15,000	404	619	508	1149	793	1033	714
	25,000	408	626	514	1161	801	1045	721
	35,000	412	632	518	1172	808	1054	728
	50,000	415	637	522	1182	815	1063	734
	100,000	419	642	527	1191	822	1071	740
	250,000	425	652	534	1208	834	1087	751
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	26	59	43	118	73	106	66
	20/50	29	64	47	129	79	116	72
	25/50	43	88	65	184	112	165	101
	25/60	46	93	68	195	118	175	107
	35/80	77	147	108	315	190	283	171
	50/100	109	201	148	435	261	391	235
	100/300	189	339	250	742	443	667	399
	250/500	358	629	464	1387	826	1247	743

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	598	1188	752	2043	1262	1839	1136	614
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	186	186	186	186	186	186	186	186
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
84	166	105	286	177	257	159	86	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

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MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 8

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	298	479	346	1073	647	966	582	281
PART 2	PERSONAL INJURY PROTECTION							
	155	204	204	411	252	370	227	168
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	307	476	386	925	638	833	574
	10,000	381	590	479	1147	791	1033	712
	15,000	385	597	484	1160	800	1045	720
	25,000	389	604	489	1173	809	1056	728
	35,000	393	609	494	1183	816	1065	734
	50,000	396	614	498	1193	823	1075	740
	100,000	399	619	502	1203	829	1083	746
	250,000	405	628	509	1220	842	1099	757
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	30	66	47	129	82	116	74
	20/50	33	71	51	141	89	127	81
	25/50	50	99	71	201	126	181	113
	25/60	53	104	75	213	133	192	120
	35/80	89	164	118	345	213	311	192
	50/100	125	224	161	478	293	430	264
	100/300	217	377	271	814	498	733	448
	250/500	410	698	503	1523	928	1371	835
								389

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		0	
	20/50		34		0	
	25/50		35		2	
	25/60		37		2	
	35/80		40		6	
	50/100		43		11	
	100/300		50		27	
	250/500		62		95	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	642	1195	843	2002	1282	1802	1154	583
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	193	193	193	193	193	193	193	193
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
90	167	118	280	179	252	162	82	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 9

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	340	539	405	1111	676	1000	608	329
PART 2	PERSONAL INJURY PROTECTION							
	187	248	248	458	273	412	246	201
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	332	476	391	952	640	857	576
	10,000	412	590	485	1180	794	1063	714
	15,000	416	597	490	1194	803	1075	722
	25,000	421	604	496	1207	812	1087	730
	35,000	425	609	500	1218	819	1096	737
	50,000	428	614	504	1228	826	1106	743
	100,000	432	619	508	1238	832	1114	749
	250,000	438	628	516	1256	844	1130	760
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	35	76	54	132	86	119	77
	20/50	39	82	59	144	94	130	84
	25/50	58	113	82	207	132	186	118
	25/60	61	119	86	219	139	197	125
	35/80	103	187	137	356	223	320	200
	50/100	144	254	187	492	307	444	276
	100/300	249	427	316	841	520	757	467
	250/500	470	789	586	1574	970	1417	872

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	607	1086	729	1880	1169	1692	1052	636
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	190	190	190	190	190	190	190	190
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2							

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300							
CLASS							
10	17	18	20	21	25	26	30
85	152	102	263	164	237	147	89
COLLISION - Waiver of Deductible Charges							
\$300 Deductible..... \$25				\$500 Deductible..... \$36			

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 10

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	328	603	420	1132	745	1019	671	322
PART 2	PERSONAL INJURY PROTECTION							
	177	267	261	460	289	414	260	195
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	299	470	383	949	678	854	610
	10,000	371	583	475	1177	841	1059	756
	15,000	375	589	480	1190	850	1071	765
	25,000	379	596	486	1203	860	1083	773
	35,000	382	601	490	1214	867	1092	780
	50,000	386	606	494	1224	875	1102	787
	100,000	389	611	498	1234	881	1110	793
	250,000	394	620	505	1252	894	1126	805
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	33	78	59	131	95	118	86
	20/50	37	85	64	144	103	129	94
	25/50	55	119	88	207	145	186	131
	25/60	58	126	93	219	154	198	139
	35/80	98	201	145	358	246	323	222
	50/100	138	275	198	497	339	448	306
	100/300	239	466	332	851	574	766	517
	250/500	452	868	615	1596	1069	1437	964

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	595	1209	754	2048	1306	1843	1175	580
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	204	204	204	204	204	204	204	204
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
83	169	106	287	183	258	165	81	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 11

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	332	716	446	1155	782	1039	704	366
PART 2	PERSONAL INJURY PROTECTION							
	186	307	271	471	309	423	278	214
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	336	532	400	985	646	887	581
	10,000	417	660	496	1221	801	1100	720
	15,000	421	667	502	1235	810	1112	729
	25,000	426	675	507	1249	819	1125	737
	35,000	430	680	512	1260	826	1134	743
	50,000	433	686	516	1271	833	1144	749
	100,000	437	692	520	1281	840	1153	755
	250,000	443	702	528	1299	852	1170	766
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	37	97	59	136	101	122	91
	20/50	41	105	64	149	110	134	99
	25/50	59	146	89	213	154	192	139
	25/60	63	154	94	226	163	203	147
	35/80	103	243	150	368	260	331	234
	50/100	144	333	205	510	357	459	322
	100/300	247	560	347	872	604	784	544
	250/500	465	1040	645	1634	1125	1469	1013
								509

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO				
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO				
	PART 3		PART 12		
	20/40	33	0	35/80	40
	20/50	34	0	50/100	43
	25/50	35	2	100/300	50
	25/60	37	2	250/500	62

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	611	1194	730	1763	1171	1587	1054	570
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	209	209	209	209	209	209	209	209
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
86	167	102	247	164	222	148	80	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 12

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	359	624	474	1145	840	1031	756	348
PART 2	PERSONAL INJURY PROTECTION							
	186	266	266	450	323	405	291	201
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	346	534	391	1029	704	926	634
	10,000	429	662	485	1276	873	1148	786
	15,000	434	670	490	1290	883	1161	795
	25,000	439	677	496	1305	893	1174	804
	35,000	443	683	500	1316	900	1184	811
	50,000	446	689	504	1327	908	1195	818
	100,000	450	694	508	1338	915	1204	824
	250,000	456	704	516	1357	929	1221	836
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	36	85	64	136	105	122	95
	20/50	40	92	69	149	114	134	104
	25/50	60	128	96	213	162	191	146
	25/60	64	135	102	226	171	203	155
	35/80	107	213	161	367	275	330	248
	50/100	151	291	220	507	379	456	342
	100/300	261	489	371	866	644	779	580
	250/500	494	907	688	1622	1201	1459	1082
								490

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		35/80	
	20/50		34		50/100	
	25/50		35		100/300	
25/60		37		250/500		62
						95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	706	1287	802	1857	1346	1671	1211	723
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	224	224	224	224	224	224	224	224
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
99	180	112	260	188	234	170	101	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 13

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	388	679	488	1117	810	1005	729	380	
PART 2	PERSONAL INJURY PROTECTION								
	208	306	281	449	321	404	289	224	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	353	519	403	997	682	897	614	363
	10,000	438	644	500	1236	846	1112	761	450
	15,000	443	651	505	1250	855	1125	770	455
	25,000	448	658	511	1264	865	1137	779	460
	35,000	451	664	515	1275	872	1147	785	464
	50,000	455	670	520	1286	880	1157	792	468
	100,000	459	675	524	1296	887	1166	798	472
	250,000	466	685	532	1315	900	1183	810	479
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	39	95	66	130	103	117	93	40
	20/50	43	103	72	142	112	128	101	44
	25/50	65	141	99	205	158	184	142	65
	25/60	69	149	105	217	167	196	151	69
	35/80	116	234	166	354	267	319	241	116
	50/100	163	319	227	492	368	442	331	162
	100/300	282	536	382	841	623	757	562	279
	250/500	534	993	709	1577	1162	1419	1047	527

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	718	1209	916	2008	1405	1807	1265	684
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	251	251	251	251	251	251	251	251
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
101	169	128	281	197	253	177	96	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 14

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	455	779	568	1039	836	935	753	457
PART 2	PERSONAL INJURY PROTECTION							
	248	374	310	425	347	382	312	268
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	410	576	497	1156	774	1040	697
	10,000	508	714	616	1433	960	1290	864
	15,000	514	722	623	1450	971	1304	874
	25,000	520	730	630	1466	981	1319	884
	35,000	524	737	636	1479	990	1330	891
	50,000	529	743	641	1491	998	1342	899
	100,000	533	749	646	1503	1006	1352	906
	250,000	541	760	656	1525	1021	1372	919
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	47	109	76	137	110	123	99
	20/50	52	118	82	149	119	134	108
	25/50	77	162	115	208	167	186	150
	25/60	82	171	121	219	176	197	159
	35/80	137	269	192	349	280	313	252
	50/100	193	367	263	478	384	430	346
	100/300	333	615	443	807	649	726	585
	250/500	629	1139	823	1501	1207	1350	1087
								632

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		35/80	
	20/50		34		50/100	
	25/50		35		100/300	
	25/60		37		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	797	1475	1115	2084	1617	1876	1455	788
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	251	251	251	251	251	251	251	251
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
112	207	156	292	226	263	204	110	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 15

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	517	860	573	1092	903	983	813	496
PART 2	PERSONAL INJURY PROTECTION							
	270	395	304	435	369	391	332	277
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	406	669	449	1143	772	1029	695
	10,000	503	830	557	1417	957	1276	862
	15,000	509	839	563	1433	968	1290	872
	25,000	515	848	569	1449	979	1305	881
	35,000	519	856	574	1462	987	1316	889
	50,000	524	863	579	1474	996	1327	897
	100,000	528	870	584	1486	1004	1338	904
	250,000	536	882	592	1508	1018	1357	917
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	56	120	77	133	114	120	103
	20/50	62	130	84	145	124	131	112
	25/50	90	179	116	207	175	186	158
	25/60	96	189	123	219	185	197	167
	35/80	159	296	194	354	297	319	268
	50/100	222	404	266	488	409	440	369
	100/300	383	679	448	831	694	749	625
	250/500	721	1257	831	1554	1294	1399	1166
								692

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1001	1633	1146	2087	1696	1878	1526	895
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	311	311	311	311	311	311	311	311
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
140	229	160	292	237	263	214	125	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 16

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	468	884	782	1091	910	982	819	466
PART 2	PERSONAL INJURY PROTECTION							
	278	405	371	434	408	391	367	283
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	384	626	435	1086	691	977	622
10,000	476	776	539	1347	857	1211	771	541
15,000	482	785	545	1362	867	1225	780	547
25,000	487	794	552	1377	876	1239	789	553
35,000	491	801	556	1389	884	1250	796	558
50,000	495	808	561	1401	891	1260	802	562
100,000	499	814	566	1412	898	1270	809	567
250,000	506	826	574	1432	911	1289	820	575
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	64	115	97	135	118	122	106
20/50	69	125	106	147	128	133	115	72
25/50	96	175	150	209	180	188	162	99
25/60	101	185	159	221	190	199	171	104
35/80	160	295	255	356	303	321	273	163
50/100	218	405	352	491	416	442	374	222
100/300	367	684	598	834	704	751	633	371
250/500	681	1274	1117	1557	1310	1403	1179	685

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	840	1505	1002	2033	1442	1830	1298	848
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	481	481	481	481	481	481	481	481
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$5								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
118	211	140	285	202	256	182	119	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 17

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	357	687	434	1076	695	968	626	358
PART 2	PERSONAL INJURY PROTECTION							
	199	292	268	438	319	394	287	220
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	349	563	467	1085	663	977	597
	10,000	433	698	579	1345	822	1211	740
	15,000	438	706	586	1361	831	1225	749
	25,000	443	714	592	1376	841	1239	757
	35,000	446	720	597	1388	848	1250	764
	50,000	450	726	602	1400	855	1260	770
	100,000	454	732	607	1411	862	1270	776
	250,000	460	743	616	1431	874	1289	787
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	36	90	56	136	87	122	78
	20/50	40	98	61	148	95	133	85
	25/50	60	137	85	209	134	187	120
	25/60	64	144	90	221	142	198	127
	35/80	107	230	144	354	228	318	205
	50/100	150	315	198	487	314	438	282
	100/300	260	533	335	827	533	743	479
	250/500	492	991	624	1542	994	1386	895

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	670	1412	928	2072	1339	1865	1205	644
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	186	186	186	186	186	186	186	186
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
94	198	130	290	187	261	169	90	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 18

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	373	898	506	1153	858	1037	772	411
PART 2	PERSONAL INJURY PROTECTION							
	221	393	284	456	364	410	328	262
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	359	617	432	1082	710	974	639
	10,000	445	765	536	1342	880	1208	792
	15,000	450	774	542	1357	890	1221	801
	25,000	455	782	548	1372	900	1235	810
	35,000	459	789	553	1384	908	1246	817
	50,000	463	796	557	1396	916	1256	824
	100,000	467	802	562	1407	923	1266	831
	250,000	474	814	570	1427	936	1285	843
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	46	120	68	143	113	129	102
	20/50	50	130	74	156	123	141	111
	25/50	71	181	102	221	171	199	154
	25/60	75	191	108	234	181	211	163
	35/80	121	303	171	376	288	339	259
	50/100	168	415	234	519	395	467	355
	100/300	285	700	395	882	666	794	600
	250/500	532	1301	734	1646	1239	1482	1116
								587

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	777	1419	945	1900	1374	1710	1237	841
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	350	350	350	350	350	350	350	350
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
109	199	132	266	192	239	173	118	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 19

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	440	853	585	1127	848	1015	763	475
PART 2	PERSONAL INJURY PROTECTION							
	239	394	312	451	348	406	313	278
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	349	607	461	1021	715	919	644
	10,000	433	753	572	1266	887	1140	799
	15,000	438	761	578	1280	897	1152	808
	25,000	443	770	585	1295	907	1165	817
	35,000	446	776	590	1306	914	1175	824
	50,000	450	783	595	1317	922	1186	831
	100,000	454	789	599	1327	930	1195	837
	250,000	460	801	608	1347	943	1212	849
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	51	116	76	140	116	126	104
	20/50	56	126	83	153	126	137	113
	25/50	80	174	116	216	174	194	156
	25/60	85	184	122	229	183	206	165
	35/80	139	290	195	368	290	331	260
	50/100	193	397	268	507	396	457	355
	100/300	331	668	453	862	665	776	598
	250/500	621	1240	843	1610	1234	1450	1110
								672

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	798	1435	1032	1835	1476	1652	1328	796
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	385	385	385	385	385	385	385	385
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
112	201	144	257	207	231	186	111	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 20

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	408	871	551	1164	870	1048	783	465
PART 2	PERSONAL INJURY PROTECTION							
	244	401	300	447	386	402	348	278
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	340	605	380	1089	742	980	668
	10,000	422	750	471	1350	920	1215	828
	15,000	426	759	477	1366	930	1229	838
	25,000	431	767	482	1381	941	1243	847
	35,000	435	774	486	1393	949	1253	854
	50,000	439	780	490	1405	957	1264	862
	100,000	442	787	494	1416	965	1274	868
	250,000	448	798	501	1436	979	1293	881
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	51	120	76	143	114	129	103
	20/50	56	130	82	156	124	141	112
	25/50	79	179	114	221	173	200	156
	25/60	83	189	120	234	183	211	165
	35/80	134	298	189	378	291	341	262
	50/100	184	407	258	522	399	470	360
	100/300	313	685	433	888	675	800	608
	250/500	583	1270	803	1659	1255	1494	1131
								669

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		0	
	20/50		34		0	
	25/50		35		2	
	25/60		37		2	
	35/80		40		6	
	50/100		43		11	
	100/300		50		27	
	250/500		62		95	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	805	1467	1063	1908	1505	1717	1355	880
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	341	341	341	341	341	341	341	341
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
113	205	149	267	211	240	190	123	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 21

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	512	929	746	1037	927	933	834	714
PART 2	PERSONAL INJURY PROTECTION							
	285	401	347	401	389	361	350	345
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	426	678	511	1238	815	1114	734
	10,000	528	841	634	1535	1011	1381	910
	15,000	534	850	641	1552	1022	1397	920
	25,000	540	860	648	1570	1033	1413	931
	35,000	545	867	654	1583	1042	1425	939
	50,000	550	875	659	1597	1051	1437	947
	100,000	554	881	664	1609	1060	1448	954
	250,000	562	894	674	1633	1075	1469	968
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	70	123	104	143	130	129	117
	20/50	76	134	113	155	141	140	127
	25/50	105	186	155	214	193	193	174
	25/60	111	197	164	226	204	203	184
	35/80	175	312	257	355	320	320	288
	50/100	239	428	351	485	437	437	393
	100/300	402	723	589	816	732	734	659
	250/500	745	1343	1090	1512	1356	1361	1220
								1020

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	944	1616	1322	2159	1786	1943	1607	1094
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	406	406	406	406	406	406	406	406
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4							

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300							
CLASS							
10	17	18	20	21	25	26	30
132	226	185	302	250	272	225	153
COLLISION - Waiver of Deductible Charges							
\$300 Deductible..... \$25				\$500 Deductible..... \$36			

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 22

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	506	929	750	1022	919	920	827	670
PART 2	PERSONAL INJURY PROTECTION							
	284	401	357	395	390	356	351	337
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	450	711	540	1261	860	1135	774
	10,000	558	882	670	1564	1066	1407	960
	15,000	564	892	677	1581	1078	1423	971
	25,000	571	902	685	1599	1090	1439	981
	35,000	576	909	691	1613	1100	1452	990
	50,000	581	917	697	1627	1109	1464	998
	100,000	585	924	702	1639	1118	1476	1006
	250,000	594	938	712	1663	1134	1497	1021
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	70	125	102	143	128	129	115
	20/50	76	136	111	155	138	139	124
	25/50	105	188	153	213	191	192	172
	25/60	110	199	162	225	201	202	181
	35/80	174	315	255	353	316	318	285
	50/100	237	431	349	481	432	433	388
	100/300	398	726	588	807	725	727	652
	250/500	738	1348	1090	1494	1343	1346	1208
								956

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	921	1517	1242	1923	1695	1731	1526	1197
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	427	427	427	427	427	427	427	427
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
129	212	174	269	237	242	214	168	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 23

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	386	833	582	1143	863	1029	777	391
PART 2	PERSONAL INJURY PROTECTION							
	219	378	311	455	358	409	322	246
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	335	620	400	1052	672	947	389
	10,000	415	769	496	1304	833	1174	482
	15,000	420	777	502	1319	843	1188	488
	25,000	425	786	507	1334	852	1201	493
	35,000	428	793	512	1346	859	1211	498
	50,000	432	800	516	1357	867	1222	502
	100,000	436	806	520	1368	874	1231	506
	250,000	442	818	528	1388	886	1249	513
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	38	120	75	136	108	122	43
	20/50	42	130	82	149	118	134	47
	25/50	63	177	114	213	166	191	69
	25/60	68	187	121	226	176	203	73
	35/80	114	292	193	366	283	329	121
	50/100	161	396	266	507	390	456	169
	100/300	280	663	449	865	661	778	290
	250/500	530	1225	837	1620	1234	1457	546

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		0	
	20/50		34		0	
	25/50		35		2	
	25/60		37		2	
	35/80		40		6	
	50/100		43		11	
	100/300		50		27	
	250/500		62		95	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	721	1427	1134	1927	1507	1734	1356	812
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	336	336	336	336	336	336	336	336
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
101	200	159	270	211	243	190	114	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 24

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	380	722	466	1076	732	969	659	374
PART 2	PERSONAL INJURY PROTECTION							
	209	336	282	441	303	397	273	231
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	373	654	492	1114	730	1003	657
	10,000	463	811	610	1381	905	1244	815
	15,000	468	820	617	1397	915	1258	824
	25,000	473	829	624	1413	926	1272	833
	35,000	477	836	629	1425	934	1283	840
	50,000	481	844	635	1437	942	1294	848
	100,000	485	850	640	1448	949	1304	854
	250,000	492	863	649	1469	963	1323	867
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	39	93	62	136	93	122	84
	20/50	43	101	67	148	101	133	91
	25/50	64	142	94	209	143	187	129
	25/60	68	150	99	221	151	198	136
	35/80	114	240	157	354	242	318	218
	50/100	161	329	215	487	332	438	299
	100/300	278	558	363	827	563	744	508
	250/500	525	1038	674	1542	1050	1388	946
								518

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		35/80	
	20/50		34		50/100	
	25/50		35		100/300	
25/60		37		250/500		62
						95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	774	1443	1050	1954	1480	1759	1332	760
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	251	251	251	251	251	251	251	251
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
108	202	147	274	207	246	186	106	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

TERRITORY 25

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	PART 12		PART 3		PART 12	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
25/60	37	2	250/500	62	95	

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	798	1493	1129	1948	1561	1753	1405	817
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	383	383	383	383	383	383	383	383
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4							

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Commonwealth Automobile Reinsurers, October 1, 2012

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 26

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	462	887	645	1012	920	911	828	432
PART 2	PERSONAL INJURY PROTECTION							
	254	405	325	416	373	374	336	273
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	417	689	497	1152	794	1037	715
10,000	517	854	616	1428	985	1286	887	522
15,000	523	864	623	1445	996	1300	897	528
25,000	529	874	630	1461	1007	1315	907	534
35,000	533	881	636	1473	1016	1326	914	538
50,000	538	889	641	1486	1024	1338	922	543
100,000	542	896	646	1498	1032	1348	930	547
250,000	550	909	656	1519	1047	1368	943	555
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	52	115	82	132	118	119	106
20/50	57	125	89	143	128	129	115	58
25/50	83	175	126	201	180	181	162	82
25/60	88	185	133	212	191	191	171	87
35/80	145	295	213	338	305	304	274	140
50/100	201	406	293	464	419	418	377	194
100/300	345	686	496	784	710	706	638	329
250/500	648	1277	925	1459	1322	1314	1189	616

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		35/80	
	20/50		34		50/100	
	25/50		35		100/300	
	25/60		37		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	1033	1618	1343	2033	1765	1830	1589	1135
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	434	434	434	434	434	434	434	434
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
145	227	188	285	247	256	222	159	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 27

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	174	291	193	585	291	527	262	178
PART 2	PERSONAL INJURY PROTECTION							
	91	123	123	228	131	205	118	106
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	237	363	285	712	456	641	410
	10,000	294	450	353	883	565	795	508
	15,000	297	455	357	893	572	804	514
	25,000	301	460	361	903	578	813	520
	35,000	303	464	365	911	583	820	524
	50,000	306	468	368	918	588	827	529
	100,000	308	472	371	926	593	833	533
	250,000	313	479	376	939	601	845	541
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	18	40	25	69	38	62	34
	20/50	20	43	27	76	41	68	37
	25/50	30	60	38	108	58	97	52
	25/60	31	63	40	115	61	103	55
	35/80	53	100	64	187	97	168	87
	50/100	74	136	88	259	133	233	120
	100/300	127	229	149	442	226	398	203
	250/500	241	424	278	828	420	745	377

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	473	949	581	1701	933	1531	840	472
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	151	151	151	151	151	151	151	151
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
66	133	81	238	131	214	118	66	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 40

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	434	790	551	1190	825	1071	743	443	
PART 2	PERSONAL INJURY PROTECTION								
	269	375	296	470	384	423	346	274	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	292	530	363	962	605	866	545	327
	10,000	362	657	450	1193	750	1074	676	405
	15,000	366	665	455	1206	759	1086	683	410
	25,000	370	672	460	1220	767	1098	691	415
	35,000	373	678	464	1230	774	1108	697	418
	50,000	377	684	468	1241	780	1117	703	422
	100,000	380	689	472	1251	787	1126	709	425
	250,000	385	699	479	1269	798	1142	719	431
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	41	107	72	140	108	126	97	45
	20/50	46	116	78	153	117	138	105	50
	25/50	70	161	109	220	164	198	147	74
	25/60	74	170	116	233	173	210	156	79
	35/80	127	268	184	379	276	341	248	133
	50/100	179	367	253	526	379	473	341	187
	100/300	312	618	427	898	640	808	576	323
	250/500	592	1148	795	1683	1190	1515	1071	611

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	634	1166	827	1758	1264	1582	1138	647
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	240	240	240	240	240	240	240	240
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
89	163	116	246	177	221	159	91	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								
LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 41

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	437	717	574	1163	872	1047	785	449
PART 2	PERSONAL INJURY PROTECTION							
	240	342	312	474	366	427	329	268
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	304	516	375	962	643	866	579
	10,000	377	640	465	1193	797	1074	718
	15,000	381	647	470	1206	806	1086	726
	25,000	385	654	476	1220	815	1098	734
	35,000	389	660	480	1230	822	1108	741
	50,000	392	666	484	1241	829	1117	747
	100,000	395	671	488	1251	836	1126	753
	250,000	401	681	495	1269	848	1142	764
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	41	99	78	137	108	123	97
	20/50	46	107	85	150	118	135	106
	25/50	70	148	117	215	167	193	150
	25/60	74	156	124	228	177	205	159
	35/80	127	246	195	371	284	334	256
	50/100	180	336	267	514	392	462	353
	100/300	313	564	450	878	667	790	600
	250/500	595	1046	834	1645	1245	1480	1120
								622

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	593	1158	837	1710	1280	1539	1152	617
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	233	233	233	233	233	233	233	233
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$2								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
83	162	117	239	179	215	161	86	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 42

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	569	919	657	1219	997	1097	897	577
PART 2	PERSONAL INJURY PROTECTION							
	300	399	325	469	416	422	374	301
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	319	557	408	987	698	888	628
	10,000	396	691	506	1224	866	1101	779
	15,000	400	698	512	1238	875	1114	788
	25,000	404	706	517	1252	885	1126	796
	35,000	408	712	522	1262	893	1136	803
	50,000	412	719	526	1273	900	1146	810
	100,000	415	724	530	1283	907	1154	816
	250,000	421	735	538	1302	921	1171	828
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	59	127	85	143	127	129	114
	20/50	65	137	92	157	138	141	124
	25/50	97	190	130	225	194	203	175
	25/60	103	200	137	238	206	215	185
	35/80	172	315	219	388	329	350	296
	50/100	241	430	300	538	453	485	407
	100/300	417	723	508	919	768	828	690
	250/500	787	1340	946	1723	1431	1551	1287
	801							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	673	1240	953	1760	1365	1584	1229	730
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	283	283	283	283	283	283	283	283
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
94	174	133	246	191	222	172	102	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25 \$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 43

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	485	850	605	1110	914	999	823	520
PART 2	PERSONAL INJURY PROTECTION							
	254	392	320	442	381	398	343	296
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	453	634	502	1121	825	1009	743
	10,000	562	786	622	1390	1023	1251	921
	15,000	568	795	630	1406	1035	1265	932
	25,000	574	804	637	1421	1046	1279	942
	35,000	579	811	642	1434	1055	1291	950
	50,000	584	818	648	1446	1064	1302	958
	100,000	589	824	653	1457	1073	1312	966
	250,000	598	836	662	1479	1088	1331	980
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	53	118	82	139	121	125	109
	20/50	58	128	89	151	131	136	118
	25/50	85	176	123	214	183	192	165
	25/60	91	186	130	226	193	204	174
	35/80	150	292	206	364	307	327	277
	50/100	209	399	281	501	421	451	379
	100/300	360	670	474	851	711	766	640
	250/500	677	1241	879	1588	1322	1429	1190

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40	33	0	35/80	40	6
	20/50	34	0	50/100	43	11
	25/50	35	2	100/300	50	27
	25/60	37	2	250/500	62	95

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	728	1347	1008	1830	1499	1647	1349	710
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	296	296	296	296	296	296	296	296
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
102	189	141	256	210	231	189	99	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 44

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	411	822	722	1038	843	934	759	404
PART 2	PERSONAL INJURY PROTECTION							
	223	372	342	425	342	383	308	248
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	304	561	409	960	702	864	632
	10,000	377	696	507	1190	870	1071	784
	15,000	381	703	513	1204	880	1083	793
	25,000	385	711	519	1217	890	1096	801
	35,000	389	718	523	1228	898	1105	808
	50,000	392	724	528	1238	906	1115	815
	100,000	395	729	532	1248	913	1123	822
	250,000	401	740	539	1266	926	1140	834
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	53	108	89	121	109	109	98
	20/50	58	117	97	133	119	119	107
	25/50	81	164	138	191	166	172	149
	25/60	85	173	146	202	176	182	158
	35/80	137	275	235	330	280	297	252
	50/100	188	378	324	457	385	411	347
	100/300	317	638	551	782	652	704	586
	250/500	591	1187	1030	1465	1213	1319	1092
								596

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		35/80	
	20/50		34		50/100	
	25/50		35		100/300	
	25/60		37		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	632	1239	840	1739	1202	1565	1082	607
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	370	370	370	370	370	370	370	370
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$4								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
88	173	118	243	168	219	151	85	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION	
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11	
Cost to Reduce Deductible from \$500 to \$300	All Classes..... \$16
Cost to Reduce Deductible from \$500 to \$0	All Classes..... \$29

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

TERRITORY 45

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	530	864	634	1079	960	971	864	535
PART 2	PERSONAL INJURY PROTECTION							
	289	390	317	416	403	374	362	296
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	389	572	436	1242	793	1118	714
	10,000	482	709	541	1540	983	1386	885
	15,000	488	717	547	1557	994	1402	895
	25,000	493	725	553	1575	1006	1418	905
	35,000	498	732	558	1589	1014	1430	913
	50,000	502	738	562	1602	1023	1442	921
	100,000	506	744	567	1615	1031	1453	928
	250,000	513	754	575	1638	1046	1475	942
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	55	122	89	144	130	130	117
	20/50	61	132	96	156	141	141	127
	25/50	90	181	132	217	195	196	176
	25/60	96	191	140	230	206	207	186
	35/80	160	299	219	364	326	328	294
	50/100	225	408	299	499	446	449	401
	100/300	388	684	501	841	751	758	676
	250/500	734	1266	928	1563	1394	1407	1255
								748

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	60	85	113	118	132

PART 3 AND PART 12	PART 3 - BODILY INJURY CAUSED BY AN UNINSURED AUTO					
	PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO					
	PART 3		PART 12		PART 3	
	20/40		33		35/80	
	20/50		34		50/100	
	25/50		35		100/300	
	25/60		37		250/500	

Higher limits for Parts 3, 5 and 12 may be provided at the option of the insurer. (RULE 3)

	CLASS							
	10	17	18	20	21	25	26	30
PART 7	COLLISION - \$500 DEDUCTIBLE							
	791	1362	1038	1882	1527	1694	1374	896
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	299	299	299	299	299	299	299	299
Additional Charge to Reduce Deductible From \$500 to \$300 -- \$3								

For Model Year/Vehicle Rating Group Relativities, refer to the Rate Pages R-35 and R-36

COLLISION - Cost to Reduce Deductible from \$500 to \$300								
CLASS								
10	17	18	20	21	25	26	30	
111	191	145	263	214	237	192	125	
COLLISION - Waiver of Deductible Charges								
\$300 Deductible..... \$25								
\$500 Deductible..... \$36								

LIMITED COLLISION								
\$500 Deductible - Charge 6% of the Part 7 premium defined in Rule 11								
Cost to Reduce Deductible from \$500 to \$300 All Classes..... \$16								
Cost to Reduce Deductible from \$500 to \$0 All Classes..... \$29								

Class 15 is 75 percent of Class 10 final rates for all coverages.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

Model Year/VRG Relativities

COLLISION

	Model Year															
VRG	2013	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998 & Prior
11	0.763	0.720	0.679	0.641	0.605	0.570	0.538	0.503	0.469	0.438	0.410	0.383	0.358	0.334	0.312	0.292
12	0.788	0.743	0.701	0.661	0.624	0.588	0.555	0.519	0.484	0.452	0.423	0.395	0.369	0.345	0.322	0.302
13	0.813	0.767	0.723	0.683	0.644	0.607	0.573	0.535	0.500	0.467	0.436	0.408	0.381	0.356	0.333	0.311
14	0.841	0.793	0.748	0.706	0.666	0.628	0.592	0.554	0.517	0.483	0.451	0.422	0.394	0.368	0.344	0.322
15	0.868	0.819	0.772	0.729	0.688	0.649	0.612	0.572	0.534	0.499	0.466	0.436	0.407	0.380	0.355	0.333
16	0.896	0.845	0.797	0.752	0.710	0.669	0.631	0.590	0.551	0.515	0.481	0.450	0.420	0.392	0.367	0.343
17	0.925	0.873	0.823	0.777	0.733	0.691	0.652	0.609	0.569	0.532	0.497	0.464	0.434	0.405	0.379	0.354
18	0.957	0.903	0.852	0.804	0.759	0.715	0.675	0.630	0.589	0.550	0.514	0.480	0.449	0.419	0.392	0.367
19	0.991	0.935	0.882	0.832	0.785	0.741	0.698	0.653	0.610	0.569	0.532	0.497	0.465	0.434	0.406	0.380
20	1.024	0.966	0.911	0.860	0.811	0.765	0.722	0.674	0.630	0.588	0.550	0.514	0.480	0.448	0.419	0.392
21	1.060	1.000	0.943	0.890	0.840	0.792	0.747	0.698	0.652	0.609	0.569	0.532	0.497	0.464	0.434	0.406
22	1.096	1.034	0.975	0.920	0.869	0.819	0.772	0.722	0.674	0.630	0.588	0.550	0.514	0.480	0.449	0.420
23	1.133	1.069	1.008	0.951	0.898	0.847	0.799	0.746	0.697	0.651	0.608	0.569	0.531	0.496	0.464	0.434
24	1.172	1.106	1.043	0.984	0.929	0.876	0.826	0.772	0.721	0.674	0.629	0.588	0.550	0.513	0.480	0.449
25	1.212	1.143	1.078	1.017	0.960	0.905	0.854	0.798	0.745	0.696	0.650	0.608	0.568	0.530	0.496	0.464
26	1.252	1.181	1.114	1.051	0.992	0.935	0.882	0.824	0.770	0.719	0.672	0.628	0.587	0.548	0.513	0.479
27	1.295	1.222	1.152	1.088	1.026	0.968	0.913	0.853	0.797	0.744	0.695	0.650	0.607	0.567	0.530	0.496
28	1.340	1.264	1.192	1.125	1.062	1.001	0.944	0.882	0.824	0.770	0.719	0.672	0.628	0.586	0.549	0.513
29	1.383	1.305	1.231	1.161	1.096	1.034	0.975	0.911	0.851	0.795	0.743	0.694	0.649	0.606	0.566	0.530
30	1.428	1.347	1.270	1.199	1.131	1.067	1.006	0.940	0.878	0.820	0.766	0.717	0.669	0.625	0.585	0.547
31	1.479	1.395	1.315	1.242	1.172	1.105	1.042	0.974	0.910	0.850	0.794	0.742	0.693	0.647	0.605	0.566
32	1.525	1.439	1.357	1.281	1.209	1.140	1.075	1.004	0.938	0.876	0.819	0.766	0.715	0.668	0.625	0.584
33	1.576	1.487	1.402	1.323	1.249	1.178	1.111	1.038	0.970	0.906	0.846	0.791	0.739	0.690	0.645	0.604
34	1.628	1.536	1.448	1.367	1.290	1.217	1.147	1.072	1.001	0.935	0.874	0.817	0.763	0.713	0.667	0.624
35	1.681	1.586	1.496	1.412	1.332	1.256	1.185	1.107	1.034	0.966	0.902	0.844	0.788	0.736	0.688	0.644
36	1.739	1.641	1.547	1.460	1.378	1.300	1.226	1.145	1.070	0.999	0.934	0.873	0.816	0.761	0.712	0.666
37	1.800	1.698	1.601	1.511	1.426	1.345	1.268	1.185	1.107	1.034	0.966	0.903	0.844	0.788	0.737	0.689
38	1.861	1.756	1.656	1.563	1.475	1.391	1.312	1.226	1.145	1.069	0.999	0.934	0.873	0.815	0.762	0.713
39	1.925	1.816	1.712	1.616	1.525	1.438	1.357	1.268	1.184	1.106	1.033	0.966	0.903	0.843	0.788	0.737
40	1.992	1.879	1.772	1.672	1.578	1.488	1.404	1.312	1.225	1.144	1.069	1.000	0.934	0.872	0.815	0.763
41	2.056	1.940	1.829	1.727	1.630	1.536	1.449	1.354	1.265	1.181	1.104	1.032	0.964	0.900	0.842	0.788
42	2.124	2.004	1.890	1.784	1.683	1.587	1.497	1.399	1.307	1.220	1.140	1.066	0.996	0.930	0.870	0.814
43	2.197	2.073	1.955	1.845	1.741	1.642	1.549	1.447	1.352	1.262	1.180	1.103	1.030	0.962	0.900	0.842
44	2.273	2.144	2.022	1.908	1.801	1.698	1.602	1.497	1.398	1.306	1.220	1.141	1.066	0.995	0.930	0.870
45	2.352	2.219	2.093	1.975	1.864	1.757	1.658	1.549	1.447	1.351	1.263	1.181	1.103	1.030	0.963	0.901
46	2.435	2.297	2.166	2.044	1.929	1.819	1.716	1.603	1.498	1.399	1.307	1.222	1.142	1.066	0.997	0.933
47	2.516	2.374	2.239	2.113	1.994	1.880	1.773	1.657	1.548	1.446	1.351	1.263	1.180	1.102	1.030	0.964
48	2.603	2.456	2.316	2.186	2.063	1.945	1.835	1.714	1.601	1.496	1.397	1.307	1.221	1.140	1.066	0.997
49	2.688	2.536	2.391	2.257	2.130	2.009	1.894	1.770	1.653	1.544	1.443	1.349	1.260	1.177	1.101	1.030
50	2.776	2.619	2.470	2.331	2.200	2.074	1.956	1.828	1.708	1.595	1.490	1.393	1.302	1.215	1.137	1.063

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

Model Year/VRG Relativities

COMPREHENSIVE

	Model Year															
VRG	2013	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998 & Prior
11	0.641	0.625	0.610	0.595	0.581	0.566	0.550	0.534	0.518	0.503	0.489	0.474	0.461	0.448	0.434	0.422
12	0.671	0.655	0.639	0.624	0.608	0.593	0.576	0.559	0.543	0.527	0.512	0.497	0.483	0.469	0.455	0.442
13	0.702	0.685	0.669	0.652	0.636	0.621	0.603	0.585	0.568	0.551	0.536	0.520	0.505	0.490	0.476	0.462
14	0.737	0.719	0.702	0.684	0.668	0.651	0.633	0.614	0.596	0.579	0.562	0.546	0.530	0.515	0.500	0.485
15	0.772	0.753	0.735	0.717	0.700	0.682	0.663	0.643	0.624	0.606	0.589	0.572	0.555	0.539	0.523	0.508
16	0.810	0.790	0.771	0.752	0.734	0.716	0.695	0.675	0.655	0.636	0.618	0.600	0.582	0.566	0.549	0.533
17	0.849	0.828	0.808	0.788	0.769	0.750	0.729	0.707	0.686	0.667	0.647	0.628	0.610	0.593	0.575	0.559
18	0.890	0.868	0.847	0.826	0.806	0.786	0.764	0.741	0.720	0.699	0.679	0.659	0.640	0.621	0.603	0.586
19	0.934	0.911	0.889	0.867	0.846	0.825	0.802	0.778	0.755	0.733	0.712	0.691	0.671	0.652	0.633	0.615
20	0.978	0.954	0.931	0.908	0.886	0.864	0.840	0.815	0.791	0.768	0.746	0.724	0.703	0.683	0.663	0.644
21	1.025	1.000	0.976	0.952	0.929	0.906	0.880	0.854	0.829	0.805	0.782	0.759	0.737	0.716	0.695	0.675
22	1.074	1.048	1.023	0.998	0.974	0.949	0.922	0.895	0.869	0.844	0.820	0.795	0.772	0.750	0.728	0.707
23	1.126	1.099	1.073	1.046	1.021	0.996	0.967	0.939	0.911	0.885	0.859	0.834	0.810	0.787	0.764	0.742
24	1.181	1.152	1.124	1.097	1.070	1.044	1.014	0.984	0.955	0.927	0.901	0.874	0.849	0.825	0.801	0.778
25	1.238	1.208	1.179	1.150	1.122	1.094	1.063	1.032	1.001	0.972	0.945	0.917	0.890	0.865	0.840	0.815
26	1.298	1.266	1.236	1.205	1.176	1.147	1.114	1.081	1.050	1.019	0.990	0.961	0.933	0.906	0.880	0.855
27	1.360	1.327	1.295	1.263	1.233	1.202	1.168	1.133	1.100	1.068	1.038	1.007	0.978	0.950	0.922	0.896
28	1.427	1.392	1.359	1.325	1.293	1.261	1.225	1.189	1.154	1.121	1.089	1.057	1.026	0.997	0.967	0.940
29	1.495	1.459	1.424	1.389	1.355	1.322	1.284	1.246	1.210	1.174	1.141	1.107	1.075	1.045	1.014	0.985
30	1.568	1.530	1.493	1.457	1.421	1.386	1.346	1.307	1.268	1.232	1.196	1.161	1.128	1.095	1.063	1.033
31	1.644	1.604	1.566	1.527	1.490	1.453	1.412	1.370	1.330	1.291	1.254	1.217	1.182	1.148	1.115	1.083
32	1.723	1.681	1.641	1.600	1.562	1.523	1.479	1.436	1.394	1.353	1.315	1.276	1.239	1.204	1.168	1.135
33	1.806	1.762	1.720	1.677	1.637	1.596	1.551	1.505	1.461	1.418	1.378	1.337	1.299	1.262	1.225	1.189
34	1.894	1.848	1.804	1.759	1.717	1.674	1.626	1.578	1.532	1.488	1.445	1.403	1.362	1.323	1.284	1.247
35	1.985	1.937	1.891	1.844	1.799	1.755	1.705	1.654	1.606	1.559	1.515	1.470	1.428	1.387	1.346	1.307
36	2.081	2.030	1.981	1.933	1.886	1.839	1.786	1.734	1.683	1.634	1.587	1.541	1.496	1.453	1.411	1.370
37	2.182	2.129	2.078	2.027	1.978	1.929	1.874	1.818	1.765	1.714	1.665	1.616	1.569	1.524	1.480	1.437
38	2.287	2.231	2.177	2.124	2.073	2.021	1.963	1.905	1.849	1.796	1.745	1.693	1.644	1.597	1.551	1.506
39	2.397	2.339	2.283	2.227	2.173	2.119	2.058	1.998	1.939	1.883	1.829	1.775	1.724	1.675	1.626	1.579
40	2.513	2.452	2.393	2.334	2.278	2.222	2.158	2.094	2.033	1.974	1.917	1.861	1.807	1.756	1.704	1.655
41	2.635	2.571	2.509	2.448	2.388	2.329	2.262	2.196	2.131	2.070	2.011	1.951	1.895	1.841	1.787	1.735
42	2.762	2.695	2.630	2.566	2.504	2.442	2.372	2.302	2.234	2.169	2.107	2.046	1.986	1.930	1.873	1.819
43	2.896	2.825	2.757	2.689	2.624	2.559	2.486	2.413	2.342	2.274	2.209	2.144	2.082	2.023	1.963	1.907
44	3.036	2.962	2.891	2.820	2.752	2.684	2.607	2.530	2.455	2.384	2.316	2.248	2.183	2.121	2.059	1.999
45	3.183	3.105	3.030	2.956	2.885	2.813	2.732	2.652	2.574	2.500	2.428	2.357	2.288	2.223	2.158	2.096
46	3.336	3.255	3.177	3.099	3.024	2.949	2.864	2.780	2.698	2.620	2.545	2.471	2.399	2.331	2.262	2.197
47	3.497	3.412	3.330	3.248	3.170	3.091	3.003	2.914	2.829	2.747	2.668	2.590	2.515	2.443	2.371	2.303
48	3.666	3.577	3.491	3.405	3.323	3.241	3.148	3.055	2.965	2.879	2.797	2.715	2.636	2.561	2.486	2.414
49	3.844	3.750	3.660	3.570	3.484	3.398	3.300	3.203	3.109	3.019	2.933	2.846	2.764	2.685	2.606	2.531
50	4.030	3.932	3.838	3.743	3.653	3.562	3.460	3.358	3.260	3.165	3.075	2.984	2.898	2.815	2.733	2.654

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

VRG ASSIGNMENT BY PRICE LIST (RULE 22)

	COLLISION				COMPREHENSIVE	
	Vans/Wagons/Pickups		All Other Vehicles		All Vehicles	
	VRG	Base List Price	VRG	Base List Price	VRG	Base List Price
RULE 22	11	\$0 - \$10,000	11	\$0 - \$7,000	11	\$0 - \$8,000
	12	\$10,001 - \$11,000	12	\$7,001 - \$7,500	12	\$8,001 - \$9,500
	13	\$11,001 - \$12,000	13	\$7,501 - \$8,000	13	\$9,501 - \$11,000
	14	\$12,001 - \$13,000	14	\$8,001 - \$8,500	14	\$11,001 - \$12,500
	15	\$13,001 - \$14,000	15	\$8,501 - \$9,000	15	\$12,501 - \$14,000
	16	\$14,001 - \$15,000	16	\$9,001 - \$9,500	16	\$14,001 - \$15,500
	17	\$15,001 - \$17,500	17	\$9,501 - \$10,000	17	\$15,501 - \$17,000
	18	\$17,501 - \$20,000	18	\$10,001 - \$10,500	18	\$17,001 - \$18,500
	19	\$20,001 - \$22,500	19	\$10,501 - \$11,000	19	\$18,501 - \$20,000
	20	\$22,501 - \$25,000	20	\$11,001 - \$11,500	20	\$20,001 - \$21,500
	21	\$25,001 - \$27,500	21	\$11,501 - \$12,000	21	\$21,501 - \$23,000
	22	\$27,501 - \$30,000	22	\$12,001 - \$13,000	22	\$23,001 - \$24,500
	23	\$30,001 - \$33,500	23	\$13,001 - \$14,000	23	\$24,501 - \$26,000
	24	\$33,501 - \$37,000	24	\$14,001 - \$15,000	24	\$26,001 - \$27,500
	25	\$37,001 - \$40,500	25	\$15,001 - \$17,500	25	\$27,501 - \$29,000
	26	\$40,501 - \$44,000	26	\$17,501 - \$20,000	26	\$29,001 - \$30,500
	27	\$44,001 - \$47,500	27	\$20,001 - \$22,500	27	\$30,501 - \$32,000
	28	\$47,501 - \$51,000	28	\$22,501 - \$25,000	28	\$32,001 - \$33,500
	29	\$51,001 - \$54,500	29	\$25,001 - \$27,500	29	\$33,501 - \$35,000
	30	\$54,501 - \$58,000	30	\$27,501 - \$30,000	30	\$35,001 - \$36,500
	31	\$58,001 - \$61,500	31	\$30,001 - \$32,500	31	\$36,501 - \$38,000
	32	\$61,501 - \$65,000	32	\$32,501 - \$36,000	32	\$38,001 - \$39,500
	33	\$65,001 - \$68,500	33	\$36,001 - \$39,500	33	\$39,501 - \$41,000
	34	\$68,501 - \$72,000	34	\$39,501 - \$43,000	34	\$41,001 - \$43,000
	35	\$72,001 - \$75,500	35	\$43,001 - \$46,500	35	\$43,001 - \$45,000
	36	\$75,501 - \$79,000	36	\$46,501 - \$50,000	36	\$45,001 - \$47,000
	37	\$79,001 - \$82,500	37	\$50,001 - \$53,500	37	\$47,001 - \$49,000
	38	\$82,501 - \$86,000	38	\$53,501 - \$57,000	38	\$49,001 - \$51,000
	39	\$86,001 - \$89,500	39	\$57,001 - \$60,500	39	\$51,001 - \$53,000
	40	\$89,501 - \$93,000	40	\$60,501 - \$64,000	40	\$53,001 - \$55,000
	41	\$93,001 - \$96,500	41	\$64,001 - \$67,500	41	\$55,001 - \$57,000
	42	\$96,501 - \$100,000	42	\$67,501 - \$71,000	42	\$57,001 - \$59,000
	43	\$100,001 - \$103,500	43	\$71,001 - \$74,500	43	\$59,001 - \$61,000
	44	\$103,501 - \$107,000	44	\$74,501 - \$78,000	44	\$61,001 - \$63,000
	45	\$107,001 - \$110,500	45	\$78,001 - \$81,500	45	\$63,001 - \$65,000
	46	\$110,501 - \$114,000	46	\$81,501 - \$85,000	46	\$65,001 - \$67,000
	47	\$114,001 - \$118,000	47	\$85,001 - \$88,500	47	\$67,001 - \$69,000
	48	\$118,001 - \$122,000	48	\$88,501 - \$92,000	48	\$69,001 - \$71,000
	49	\$122,001 - \$126,000	49	\$92,001 - \$95,500	49	\$71,001 - \$73,000
	50	\$126,001 - \$130,000	50	\$95,501 - \$99,000	50	\$73,001 - \$75,000
VRG 50	Factor 0.020	Maximum Price \$130,000	Factor 0.015	Maximum Price \$99,000	Factor 0.030	Maximum Price \$75,000

STATED AMOUNT DIVISORS

COLLISION				COMPREHENSIVE	
Vans/Wagons/Pickups		All Other Vehicles		All Vehicles	
<u>VRG</u>	<u>Divisor</u>	<u>VRG</u>	<u>Divisor</u>	<u>VRG</u>	<u>Divisor</u>
11	\$5,000	11	\$3,500	11	\$4,000
12	\$10,500	12	\$7,250	12	\$8,750
13	\$11,500	13	\$7,750	13	\$10,250
14	\$12,500	14	\$8,250	14	\$11,750
15	\$13,500	15	\$8,750	15	\$13,250
16	\$14,500	16	\$9,250	16	\$14,750
17	\$16,250	17	\$9,750	17	\$16,250
18	\$18,750	18	\$10,250	18	\$17,750
19	\$21,250	19	\$10,750	19	\$19,250
20	\$23,750	20	\$11,250	20	\$20,750
21	\$26,250	21	\$11,750	21	\$22,250
22	\$28,750	22	\$12,500	22	\$23,750
23	\$31,750	23	\$13,500	23	\$25,250
24	\$35,250	24	\$14,500	24	\$26,750
25	\$38,750	25	\$16,250	25	\$28,250
26	\$42,250	26	\$18,750	26	\$29,750
27	\$45,750	27	\$21,250	27	\$31,250
28	\$49,250	28	\$23,750	28	\$32,750
29	\$52,750	29	\$26,250	29	\$34,250
30	\$56,250	30	\$28,750	30	\$35,750
31	\$59,750	31	\$31,250	31	\$37,250
32	\$63,250	32	\$34,250	32	\$38,750
33	\$66,750	33	\$37,750	33	\$40,250
34	\$70,250	34	\$41,250	34	\$42,000
35	\$73,750	35	\$44,750	35	\$44,000
36	\$77,250	36	\$48,250	36	\$46,000
37	\$80,750	37	\$51,750	37	\$48,000
38	\$84,250	38	\$55,250	38	\$50,000
39	\$87,750	39	\$58,750	39	\$52,000
40	\$91,250	40	\$62,250	40	\$54,000
41	\$94,750	41	\$65,750	41	\$56,000
42	\$98,250	42	\$69,250	42	\$58,000
43	\$101,750	43	\$72,750	43	\$60,000
44	\$105,250	44	\$76,250	44	\$62,000
45	\$108,750	45	\$79,750	45	\$64,000
46	\$112,250	46	\$83,250	46	\$66,000
47	\$116,000	47	\$86,750	47	\$68,000
48	\$120,000	48	\$90,250	48	\$70,000
49	\$124,000	49	\$93,750	49	\$72,000
50	\$128,000	50	\$97,250	50	\$74,000

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT COMPREHENSIVE \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
11	2.58	2.53	2.74	2.56	2.79	2.88	2.98	3.09	3.04	3.27	3.35	3.59	4.02	4.02	4.98	7.71	2.98
12	1.23	1.21	1.31	1.23	1.33	1.38	1.43	1.48	1.46	1.56	1.60	1.72	1.92	1.92	2.38	3.69	1.43
13	1.10	1.08	1.17	1.10	1.19	1.23	1.27	1.32	1.30	1.40	1.43	1.53	1.72	1.72	2.13	3.29	1.27
14	1.01	0.99	1.07	1.00	1.09	1.13	1.17	1.21	1.19	1.28	1.31	1.41	1.57	1.57	1.95	3.02	1.17
15	0.94	0.92	1.00	0.93	1.01	1.05	1.08	1.12	1.11	1.19	1.22	1.31	1.46	1.46	1.81	2.80	1.08
16	0.88	0.87	0.94	0.88	0.96	0.99	1.02	1.06	1.04	1.12	1.15	1.23	1.38	1.38	1.71	2.64	1.02
17	0.84	0.83	0.89	0.84	0.91	0.94	0.97	1.01	0.99	1.07	1.09	1.17	1.31	1.31	1.62	2.51	0.97
18	0.81	0.79	0.86	0.80	0.87	0.90	0.93	0.97	0.95	1.02	1.05	1.12	1.26	1.26	1.56	2.41	0.93
19	0.78	0.77	0.83	0.78	0.84	0.87	0.90	0.94	0.92	0.99	1.01	1.09	1.22	1.22	1.51	2.33	0.90
20	0.76	0.74	0.81	0.75	0.82	0.85	0.88	0.91	0.90	0.96	0.99	1.06	1.18	1.18	1.47	2.27	0.88
21	0.74	0.73	0.79	0.74	0.80	0.83	0.86	0.89	0.88	0.94	0.96	1.03	1.16	1.16	1.43	2.22	0.86
22	0.73	0.71	0.77	0.72	0.79	0.81	0.84	0.87	0.86	0.92	0.95	1.01	1.14	1.14	1.41	2.18	0.84
23	0.72	0.70	0.76	0.71	0.78	0.80	0.83	0.86	0.85	0.91	0.93	1.00	1.12	1.12	1.39	2.14	0.83
24	0.71	0.70	0.75	0.71	0.77	0.79	0.82	0.85	0.84	0.90	0.92	0.99	1.11	1.11	1.37	2.12	0.82
25	0.71	0.69	0.75	0.70	0.76	0.79	0.82	0.85	0.83	0.89	0.92	0.98	1.10	1.10	1.36	2.11	0.82
26	0.70	0.69	0.75	0.70	0.76	0.79	0.81	0.84	0.83	0.89	0.91	0.98	1.10	1.10	1.36	2.10	0.81
27	0.70	0.69	0.74	0.70	0.76	0.78	0.81	0.84	0.83	0.89	0.91	0.97	1.09	1.09	1.35	2.09	0.81
28	0.70	0.69	0.75	0.70	0.76	0.78	0.81	0.84	0.83	0.89	0.91	0.98	1.09	1.09	1.36	2.10	0.81
29	0.70	0.69	0.75	0.70	0.76	0.79	0.81	0.84	0.83	0.89	0.91	0.98	1.10	1.10	1.36	2.10	0.81
30	0.71	0.69	0.75	0.70	0.76	0.79	0.82	0.85	0.83	0.89	0.92	0.98	1.10	1.10	1.36	2.11	0.82
31	0.71	0.70	0.75	0.71	0.77	0.79	0.82	0.85	0.84	0.90	0.92	0.99	1.11	1.11	1.37	2.12	0.82
32	0.72	0.70	0.76	0.71	0.77	0.80	0.83	0.86	0.84	0.91	0.93	1.00	1.12	1.12	1.38	2.14	0.83
33	0.72	0.71	0.77	0.72	0.78	0.81	0.83	0.87	0.85	0.92	0.94	1.01	1.13	1.13	1.40	2.16	0.83
34	0.73	0.71	0.77	0.72	0.78	0.81	0.84	0.87	0.86	0.92	0.94	1.01	1.13	1.13	1.40	2.17	0.84
35	0.73	0.71	0.77	0.72	0.78	0.81	0.84	0.87	0.86	0.92	0.94	1.01	1.13	1.13	1.40	2.17	0.84
36	0.73	0.71	0.77	0.72	0.79	0.81	0.84	0.87	0.86	0.92	0.95	1.01	1.14	1.14	1.41	2.18	0.84
37	0.73	0.72	0.78	0.73	0.79	0.82	0.85	0.88	0.86	0.93	0.95	1.02	1.14	1.14	1.41	2.19	0.85
38	0.74	0.72	0.78	0.73	0.80	0.82	0.85	0.88	0.87	0.93	0.96	1.02	1.15	1.15	1.42	2.20	0.85
39	0.74	0.73	0.79	0.74	0.80	0.83	0.86	0.89	0.88	0.94	0.96	1.03	1.16	1.16	1.43	2.22	0.86
40	0.75	0.74	0.80	0.74	0.81	0.84	0.87	0.90	0.88	0.95	0.97	1.04	1.17	1.17	1.45	2.24	0.87
41	0.76	0.74	0.80	0.75	0.82	0.85	0.88	0.91	0.89	0.96	0.98	1.05	1.18	1.18	1.46	2.26	0.88
42	0.77	0.75	0.81	0.76	0.83	0.86	0.89	0.92	0.90	0.97	1.00	1.07	1.20	1.20	1.48	2.29	0.89
43	0.78	0.76	0.83	0.77	0.84	0.87	0.90	0.93	0.92	0.98	1.01	1.08	1.21	1.21	1.50	2.32	0.90
44	0.79	0.77	0.84	0.78	0.85	0.88	0.91	0.95	0.93	1.00	1.02	1.10	1.23	1.23	1.52	2.36	0.91
45	0.80	0.79	0.85	0.80	0.87	0.90	0.93	0.96	0.94	1.01	1.04	1.11	1.25	1.25	1.55	2.39	0.93
46	0.81	0.80	0.86	0.81	0.88	0.91	0.94	0.98	0.96	1.03	1.06	1.13	1.27	1.27	1.57	2.43	0.94
47	0.83	0.81	0.88	0.82	0.89	0.93	0.96	0.99	0.98	1.05	1.07	1.15	1.29	1.29	1.60	2.47	0.96
48	0.84	0.83	0.90	0.84	0.91	0.94	0.97	1.01	1.00	1.07	1.09	1.17	1.31	1.31	1.63	2.52	0.97
49	0.86	0.84	0.91	0.85	0.93	0.96	0.99	1.03	1.01	1.09	1.12	1.20	1.34	1.34	1.66	2.57	0.99
50	0.88	0.86	0.93	0.87	0.95	0.98	1.01	1.05	1.03	1.11	1.14	1.22	1.37	1.37	1.69	2.62	1.01

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT COMPREHENSIVE \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	18	19	20	21	22	23	24	25	26	27	40	41	42	43	44	45
11	5.61	6.17	5.46	6.51	6.84	5.38	4.02	6.14	6.95	2.42	3.85	3.73	4.54	4.74	5.93	4.79
12	2.68	2.95	2.61	3.11	3.27	2.58	1.92	2.94	3.33	1.16	1.84	1.79	2.17	2.27	2.84	2.29
13	2.40	2.64	2.34	2.78	2.92	2.30	1.72	2.62	2.97	1.03	1.64	1.60	1.94	2.03	2.53	2.05
14	2.20	2.41	2.14	2.55	2.68	2.11	1.57	2.40	2.72	0.95	1.51	1.46	1.78	1.86	2.32	1.88
15	2.04	2.24	1.99	2.37	2.49	1.96	1.46	2.23	2.53	0.88	1.40	1.36	1.65	1.72	2.16	1.74
16	1.92	2.11	1.87	2.23	2.34	1.85	1.38	2.10	2.38	0.83	1.32	1.28	1.55	1.63	2.03	1.64
17	1.83	2.01	1.78	2.12	2.23	1.76	1.31	2.00	2.27	0.79	1.25	1.22	1.48	1.55	1.93	1.56
18	1.75	1.93	1.71	2.04	2.14	1.68	1.26	1.92	2.18	0.76	1.20	1.17	1.42	1.48	1.86	1.50
19	1.70	1.87	1.65	1.97	2.07	1.63	1.22	1.86	2.11	0.73	1.16	1.13	1.37	1.44	1.80	1.45
20	1.65	1.81	1.61	1.91	2.01	1.58	1.18	1.81	2.05	0.71	1.13	1.10	1.33	1.40	1.74	1.41
21	1.61	1.77	1.57	1.87	1.97	1.55	1.16	1.76	2.00	0.70	1.11	1.07	1.30	1.36	1.70	1.38
22	1.58	1.74	1.54	1.84	1.93	1.52	1.14	1.73	1.96	0.68	1.09	1.05	1.28	1.34	1.67	1.35
23	1.56	1.72	1.52	1.81	1.90	1.50	1.12	1.71	1.94	0.67	1.07	1.04	1.26	1.32	1.65	1.33
24	1.55	1.70	1.51	1.79	1.89	1.48	1.11	1.69	1.92	0.67	1.06	1.03	1.25	1.31	1.63	1.32
25	1.53	1.69	1.49	1.78	1.87	1.47	1.10	1.68	1.90	0.66	1.05	1.02	1.24	1.30	1.62	1.31
26	1.53	1.68	1.49	1.77	1.86	1.47	1.10	1.67	1.89	0.66	1.05	1.02	1.23	1.29	1.61	1.30
27	1.52	1.68	1.48	1.77	1.86	1.46	1.09	1.67	1.89	0.66	1.04	1.01	1.23	1.29	1.61	1.30
28	1.53	1.68	1.49	1.77	1.86	1.46	1.09	1.67	1.89	0.66	1.05	1.02	1.23	1.29	1.61	1.30
29	1.53	1.68	1.49	1.77	1.86	1.47	1.10	1.67	1.89	0.66	1.05	1.02	1.24	1.29	1.62	1.31
30	1.54	1.69	1.50	1.78	1.87	1.47	1.10	1.68	1.90	0.66	1.05	1.02	1.24	1.30	1.62	1.31
31	1.54	1.70	1.50	1.79	1.88	1.48	1.11	1.69	1.92	0.67	1.06	1.03	1.25	1.31	1.63	1.32
32	1.56	1.71	1.52	1.81	1.90	1.49	1.12	1.70	1.93	0.67	1.07	1.04	1.26	1.32	1.65	1.33
33	1.57	1.73	1.53	1.82	1.92	1.51	1.13	1.72	1.95	0.68	1.08	1.05	1.27	1.33	1.66	1.34
34	1.58	1.74	1.54	1.83	1.93	1.52	1.13	1.73	1.96	0.68	1.08	1.05	1.28	1.33	1.67	1.35
35	1.58	1.74	1.54	1.83	1.93	1.52	1.13	1.73	1.96	0.68	1.08	1.05	1.28	1.34	1.67	1.35
36	1.58	1.74	1.54	1.84	1.93	1.52	1.14	1.73	1.96	0.68	1.09	1.05	1.28	1.34	1.67	1.35
37	1.59	1.75	1.55	1.85	1.94	1.53	1.14	1.74	1.97	0.69	1.09	1.06	1.29	1.35	1.68	1.36
38	1.60	1.76	1.56	1.86	1.95	1.54	1.15	1.75	1.99	0.69	1.10	1.07	1.29	1.35	1.69	1.37
39	1.61	1.77	1.57	1.87	1.97	1.55	1.16	1.77	2.00	0.70	1.11	1.07	1.30	1.36	1.71	1.38
40	1.63	1.79	1.59	1.89	1.99	1.56	1.17	1.78	2.02	0.70	1.12	1.08	1.32	1.38	1.72	1.39
41	1.65	1.81	1.60	1.91	2.01	1.58	1.18	1.80	2.04	0.71	1.13	1.10	1.33	1.39	1.74	1.41
42	1.67	1.83	1.62	1.93	2.03	1.60	1.20	1.82	2.07	0.72	1.14	1.11	1.35	1.41	1.76	1.42
43	1.69	1.86	1.65	1.96	2.06	1.62	1.21	1.85	2.09	0.73	1.16	1.12	1.37	1.43	1.79	1.44
44	1.71	1.89	1.67	1.99	2.09	1.65	1.23	1.88	2.13	0.74	1.18	1.14	1.39	1.45	1.81	1.46
45	1.74	1.91	1.70	2.02	2.12	1.67	1.25	1.90	2.16	0.75	1.19	1.16	1.41	1.47	1.84	1.49
46	1.77	1.95	1.72	2.05	2.16	1.70	1.27	1.94	2.19	0.76	1.21	1.18	1.43	1.50	1.87	1.51
47	1.80	1.98	1.75	2.09	2.20	1.73	1.29	1.97	2.23	0.78	1.23	1.20	1.46	1.52	1.90	1.54
48	1.83	2.02	1.79	2.13	2.24	1.76	1.31	2.01	2.27	0.79	1.26	1.22	1.48	1.55	1.94	1.57
49	1.87	2.06	1.82	2.17	2.28	1.79	1.34	2.04	2.32	0.81	1.28	1.24	1.51	1.58	1.98	1.60
50	1.91	2.10	1.86	2.21	2.33	1.83	1.37	2.09	2.36	0.82	1.31	1.27	1.54	1.61	2.02	1.63

STATED AMOUNT FIRE \$500 DEDUCTIBLE RATES PER \$100

<u>VRG</u>	<u>All Territories</u>
11	0.38
12	0.18
13	0.16
14	0.15
15	0.14
16	0.13
17	0.12
18	0.12
19	0.11
20	0.11
21	0.11
22	0.11
23	0.11
24	0.10
25	0.10
26	0.10
27	0.10
28	0.10
29	0.10
30	0.10
31	0.10
32	0.11
33	0.11
34	0.11
35	0.11
36	0.11
37	0.11
38	0.11
39	0.11
40	0.11
41	0.11
42	0.11
43	0.11
44	0.12
45	0.12
46	0.12
47	0.12
48	0.12
49	0.13
50	0.13

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT THEFT \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
11	1.43	1.39	1.54	1.42	1.57	1.64	1.71	1.79	1.75	1.91	1.97	2.13	2.44	2.44	3.11	5.02	1.71
12	0.68	0.67	0.74	0.68	0.75	0.78	0.82	0.85	0.84	0.91	0.94	1.02	1.17	1.17	1.49	2.40	0.82
13	0.61	0.60	0.66	0.61	0.67	0.70	0.73	0.76	0.75	0.82	0.84	0.91	1.04	1.04	1.33	2.14	0.73
14	0.56	0.55	0.60	0.55	0.62	0.64	0.67	0.70	0.69	0.75	0.77	0.84	0.95	0.95	1.22	1.96	0.67
15	0.52	0.51	0.56	0.51	0.57	0.60	0.62	0.65	0.64	0.69	0.71	0.78	0.89	0.89	1.13	1.82	0.62
16	0.49	0.48	0.53	0.49	0.54	0.56	0.59	0.61	0.60	0.65	0.67	0.73	0.83	0.83	1.07	1.72	0.59
17	0.47	0.45	0.50	0.46	0.51	0.53	0.56	0.58	0.57	0.62	0.64	0.70	0.79	0.79	1.01	1.64	0.56
18	0.45	0.44	0.48	0.44	0.49	0.51	0.53	0.56	0.55	0.60	0.61	0.67	0.76	0.76	0.97	1.57	0.53
19	0.43	0.42	0.47	0.43	0.48	0.50	0.52	0.54	0.53	0.58	0.60	0.65	0.74	0.74	0.94	1.52	0.52
20	0.42	0.41	0.45	0.42	0.46	0.48	0.50	0.53	0.52	0.56	0.58	0.63	0.72	0.72	0.91	1.48	0.50
21	0.41	0.40	0.44	0.41	0.45	0.47	0.49	0.51	0.50	0.55	0.57	0.61	0.70	0.70	0.89	1.44	0.49
22	0.40	0.39	0.43	0.40	0.44	0.46	0.48	0.50	0.49	0.54	0.55	0.60	0.69	0.69	0.88	1.42	0.48
23	0.40	0.39	0.43	0.39	0.44	0.46	0.48	0.50	0.49	0.53	0.55	0.59	0.68	0.68	0.87	1.40	0.48
24	0.39	0.38	0.42	0.39	0.43	0.45	0.47	0.49	0.48	0.53	0.54	0.59	0.67	0.67	0.86	1.38	0.47
25	0.39	0.38	0.42	0.39	0.43	0.45	0.47	0.49	0.48	0.52	0.54	0.58	0.67	0.67	0.85	1.37	0.47
26	0.39	0.38	0.42	0.39	0.43	0.45	0.46	0.49	0.48	0.52	0.54	0.58	0.66	0.66	0.85	1.37	0.46
27	0.39	0.38	0.42	0.38	0.43	0.45	0.46	0.49	0.48	0.52	0.53	0.58	0.66	0.66	0.84	1.36	0.46
28	0.39	0.38	0.42	0.38	0.43	0.45	0.46	0.49	0.48	0.52	0.53	0.58	0.66	0.66	0.85	1.36	0.46
29	0.39	0.38	0.42	0.39	0.43	0.45	0.47	0.49	0.48	0.52	0.54	0.58	0.66	0.66	0.85	1.37	0.47
30	0.39	0.38	0.42	0.39	0.43	0.45	0.47	0.49	0.48	0.52	0.54	0.58	0.67	0.67	0.85	1.37	0.47
31	0.39	0.38	0.42	0.39	0.43	0.45	0.47	0.49	0.48	0.53	0.54	0.59	0.67	0.67	0.86	1.38	0.47
32	0.40	0.39	0.43	0.39	0.44	0.46	0.47	0.50	0.49	0.53	0.55	0.59	0.68	0.68	0.86	1.39	0.47
33	0.40	0.39	0.43	0.40	0.44	0.46	0.48	0.50	0.49	0.53	0.55	0.60	0.68	0.68	0.87	1.40	0.48
34	0.40	0.39	0.43	0.40	0.44	0.46	0.48	0.50	0.49	0.54	0.55	0.60	0.69	0.69	0.88	1.41	0.48
35	0.40	0.39	0.43	0.40	0.44	0.46	0.48	0.50	0.49	0.54	0.55	0.60	0.69	0.69	0.88	1.41	0.48
36	0.40	0.39	0.43	0.40	0.44	0.46	0.48	0.50	0.49	0.54	0.55	0.60	0.69	0.69	0.88	1.42	0.48
37	0.40	0.40	0.44	0.40	0.45	0.47	0.48	0.51	0.50	0.54	0.56	0.61	0.69	0.69	0.88	1.42	0.48
38	0.41	0.40	0.44	0.40	0.45	0.47	0.49	0.51	0.50	0.54	0.56	0.61	0.70	0.70	0.89	1.43	0.49
39	0.41	0.40	0.44	0.41	0.45	0.47	0.49	0.51	0.50	0.55	0.57	0.61	0.70	0.70	0.89	1.44	0.49
40	0.41	0.40	0.45	0.41	0.46	0.48	0.50	0.52	0.51	0.55	0.57	0.62	0.71	0.71	0.90	1.46	0.50
41	0.42	0.41	0.45	0.42	0.46	0.48	0.50	0.52	0.51	0.56	0.58	0.63	0.72	0.72	0.91	1.47	0.50
42	0.42	0.41	0.46	0.42	0.47	0.49	0.51	0.53	0.52	0.57	0.58	0.63	0.72	0.72	0.92	1.49	0.51
43	0.43	0.42	0.46	0.43	0.47	0.49	0.51	0.54	0.53	0.58	0.59	0.64	0.73	0.73	0.94	1.51	0.51
44	0.44	0.43	0.47	0.43	0.48	0.50	0.52	0.55	0.54	0.58	0.60	0.65	0.74	0.74	0.95	1.53	0.52
45	0.44	0.43	0.48	0.44	0.49	0.51	0.53	0.55	0.54	0.59	0.61	0.66	0.76	0.76	0.97	1.56	0.53
46	0.45	0.44	0.49	0.45	0.50	0.52	0.54	0.56	0.55	0.60	0.62	0.67	0.77	0.77	0.98	1.58	0.54
47	0.46	0.45	0.49	0.45	0.50	0.53	0.55	0.57	0.56	0.61	0.63	0.68	0.78	0.78	1.00	1.61	0.55
48	0.47	0.46	0.50	0.46	0.51	0.54	0.56	0.58	0.57	0.62	0.64	0.70	0.80	0.80	1.02	1.64	0.56
49	0.48	0.46	0.51	0.47	0.52	0.55	0.57	0.60	0.58	0.64	0.65	0.71	0.81	0.81	1.04	1.67	0.57
50	0.48	0.47	0.52	0.48	0.53	0.56	0.58	0.61	0.60	0.65	0.67	0.73	0.83	0.83	1.06	1.70	0.58

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

STATED AMOUNT THEFT \$500 DEDUCTIBLE RATES PER \$100

Territory VRG	18	19	20	21	22	23	24	25	26	27	40	41	42	43	44	45
11	3.55	3.94	3.45	4.18	4.41	3.39	2.44	3.92	4.49	1.31	2.31	2.23	2.80	2.94	3.77	2.98
12	1.70	1.89	1.65	2.00	2.11	1.62	1.17	1.87	2.15	0.63	1.11	1.07	1.34	1.41	1.80	1.42
13	1.52	1.68	1.47	1.78	1.89	1.45	1.04	1.67	1.92	0.56	0.99	0.96	1.19	1.26	1.61	1.27
14	1.39	1.54	1.35	1.63	1.73	1.33	0.95	1.53	1.76	0.51	0.91	0.87	1.09	1.15	1.48	1.16
15	1.29	1.43	1.25	1.52	1.60	1.23	0.89	1.42	1.63	0.48	0.84	0.81	1.02	1.07	1.37	1.08
16	1.22	1.35	1.18	1.43	1.51	1.16	0.83	1.34	1.54	0.45	0.79	0.77	0.96	1.01	1.29	1.02
17	1.16	1.28	1.12	1.36	1.44	1.11	0.79	1.28	1.46	0.43	0.75	0.73	0.91	0.96	1.23	0.97
18	1.11	1.23	1.08	1.31	1.38	1.06	0.76	1.23	1.40	0.41	0.72	0.70	0.87	0.92	1.18	0.93
19	1.07	1.19	1.04	1.26	1.34	1.03	0.74	1.19	1.36	0.40	0.70	0.68	0.85	0.89	1.14	0.90
20	1.04	1.16	1.01	1.23	1.30	1.00	0.72	1.15	1.32	0.39	0.68	0.66	0.82	0.87	1.11	0.88
21	1.02	1.13	0.99	1.20	1.27	0.97	0.70	1.13	1.29	0.38	0.66	0.64	0.80	0.85	1.08	0.86
22	1.00	1.11	0.97	1.18	1.24	0.96	0.69	1.11	1.27	0.37	0.65	0.63	0.79	0.83	1.06	0.84
23	0.99	1.10	0.96	1.16	1.23	0.94	0.68	1.09	1.25	0.37	0.64	0.62	0.78	0.82	1.05	0.83
24	0.98	1.09	0.95	1.15	1.22	0.93	0.67	1.08	1.24	0.36	0.64	0.62	0.77	0.81	1.04	0.82
25	0.97	1.08	0.94	1.14	1.21	0.93	0.67	1.07	1.23	0.36	0.63	0.61	0.76	0.80	1.03	0.81
26	0.97	1.07	0.94	1.14	1.20	0.92	0.66	1.07	1.22	0.36	0.63	0.61	0.76	0.80	1.03	0.81
27	0.96	1.07	0.94	1.13	1.20	0.92	0.66	1.06	1.22	0.36	0.63	0.61	0.76	0.80	1.02	0.81
28	0.96	1.07	0.94	1.14	1.20	0.92	0.66	1.07	1.22	0.36	0.63	0.61	0.76	0.80	1.03	0.81
29	0.97	1.07	0.94	1.14	1.20	0.92	0.66	1.07	1.22	0.36	0.63	0.61	0.76	0.80	1.03	0.81
30	0.97	1.08	0.94	1.14	1.21	0.93	0.67	1.07	1.23	0.36	0.63	0.61	0.77	0.81	1.03	0.81
31	0.98	1.09	0.95	1.15	1.21	0.93	0.67	1.08	1.24	0.36	0.64	0.62	0.77	0.81	1.04	0.82
32	0.98	1.09	0.96	1.16	1.22	0.94	0.68	1.09	1.25	0.36	0.64	0.62	0.78	0.82	1.05	0.83
33	0.99	1.10	0.96	1.17	1.24	0.95	0.68	1.10	1.26	0.37	0.65	0.63	0.78	0.82	1.06	0.83
34	1.00	1.11	0.97	1.17	1.24	0.95	0.69	1.10	1.26	0.37	0.65	0.63	0.79	0.83	1.06	0.84
35	1.00	1.11	0.97	1.18	1.24	0.95	0.69	1.10	1.26	0.37	0.65	0.63	0.79	0.83	1.06	0.84
36	1.00	1.11	0.97	1.18	1.25	0.96	0.69	1.11	1.27	0.37	0.65	0.63	0.79	0.83	1.06	0.84
37	1.01	1.12	0.98	1.18	1.25	0.96	0.69	1.11	1.27	0.37	0.66	0.63	0.79	0.83	1.07	0.84
38	1.01	1.12	0.98	1.19	1.26	0.97	0.70	1.12	1.28	0.38	0.66	0.64	0.80	0.84	1.08	0.85
39	1.02	1.13	0.99	1.20	1.27	0.98	0.70	1.13	1.29	0.38	0.67	0.64	0.80	0.85	1.08	0.86
40	1.03	1.14	1.00	1.21	1.28	0.98	0.71	1.14	1.30	0.38	0.67	0.65	0.81	0.85	1.10	0.86
41	1.04	1.16	1.01	1.23	1.30	1.00	0.72	1.15	1.32	0.39	0.68	0.66	0.82	0.86	1.11	0.87
42	1.05	1.17	1.02	1.24	1.31	1.01	0.72	1.16	1.33	0.39	0.69	0.66	0.83	0.87	1.12	0.88
43	1.07	1.19	1.04	1.26	1.33	1.02	0.73	1.18	1.35	0.40	0.70	0.67	0.84	0.89	1.14	0.90
44	1.08	1.20	1.05	1.28	1.35	1.04	0.74	1.20	1.37	0.40	0.71	0.68	0.85	0.90	1.15	0.91
45	1.10	1.22	1.07	1.30	1.37	1.05	0.76	1.22	1.39	0.41	0.72	0.69	0.87	0.91	1.17	0.92
46	1.12	1.24	1.09	1.32	1.39	1.07	0.77	1.24	1.42	0.41	0.73	0.70	0.88	0.93	1.19	0.94
47	1.14	1.26	1.11	1.34	1.42	1.09	0.78	1.26	1.44	0.42	0.74	0.72	0.90	0.94	1.21	0.95
48	1.16	1.29	1.13	1.36	1.44	1.11	0.80	1.28	1.47	0.43	0.76	0.73	0.91	0.96	1.23	0.97
49	1.18	1.31	1.15	1.39	1.47	1.13	0.81	1.31	1.50	0.44	0.77	0.74	0.93	0.98	1.26	0.99
50	1.21	1.34	1.17	1.42	1.50	1.15	0.83	1.33	1.53	0.45	0.79	0.76	0.95	1.00	1.28	1.01