

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							
	294	380	346	712	516	641	464	285
PART 2	PERSONAL INJURY PROTECTION							
	110	137	121	217	163	195	147	98
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	429	597	492	1034	773	931	696
	10,000	656	913	752	1581	1182	1423	1064
	15,000	714	993	819	1721	1286	1549	1158
	25,000	750	1044	861	1808	1352	1628	1217
	35,000	760	1057	871	1831	1369	1649	1233
	50,000	764	1063	876	1841	1376	1657	1239
	100,000	767	1068	880	1850	1383	1666	1245
	250,000	773	1076	887	1864	1394	1679	1255
	750							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	39	50	46	95	68	86	61
	20/50	42	54	50	103	74	93	66
	25/50	76	97	89	184	132	166	119
	25/60	79	102	93	192	138	173	124
	35/80	142	183	168	345	249	311	224
	50/100	206	265	242	499	360	450	324
	100/300	385	497	454	934	675	842	607
	250/500	675	871	795	1636	1183	1475	1064
	655							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	1683	2797	1951	4380	2945	3942	2651	1614
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	291	291	291	291	291	291	291	291
	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
202	336	234	526	353	473	318	194
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							
	327	437	393	785	575	707	518	337
PART 2	PERSONAL INJURY PROTECTION							
	114	150	127	235	165	212	149	110
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	476	664	555	1147	855	1032	770
	10,000	728	1015	849	1754	1307	1578	1177
	15,000	792	1105	924	1909	1423	1717	1281
	25,000	833	1161	971	2006	1495	1805	1347
	35,000	843	1176	983	2031	1514	1828	1364
	50,000	847	1182	988	2042	1522	1837	1371
	100,000	852	1188	993	2052	1530	1846	1378
	250,000	858	1197	1001	2068	1542	1861	1388
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	43	58	52	104	76	94	68
	20/50	47	63	56	113	83	102	74
	25/50	84	112	101	202	148	182	132
	25/60	87	117	105	211	154	190	138
	35/80	158	211	190	380	278	342	250
	50/100	228	306	275	549	402	495	361
	100/300	428	573	515	1029	753	927	677
	250/500	750	1003	902	1802	1319	1624	1187

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	1667	2612	1967	4523	2822	4071	2540	1730
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	376	376	376	376	376	376	376	376
	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	
200	313	236	543	339	489	305	208	
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							
	339	456	393	833	607	750	546	344
PART 2	PERSONAL INJURY PROTECTION							
	131	172	142	276	191	248	172	123
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	466	681	512	1111	819	1000	737
	10,000	713	1041	783	1699	1252	1529	1127
	15,000	775	1133	852	1849	1363	1664	1226
	25,000	815	1191	895	1943	1432	1749	1289
	35,000	825	1206	907	1968	1450	1771	1305
	50,000	829	1212	911	1978	1458	1780	1312
	100,000	834	1218	916	1988	1465	1789	1318
	250,000	840	1228	923	2003	1477	1803	1329
	846							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	45	60	52	111	81	100	73
	20/50	49	65	56	120	88	109	79
	25/50	87	117	101	215	157	194	141
	25/60	91	122	105	224	164	202	147
	35/80	164	220	190	404	294	364	265
	50/100	237	318	275	583	425	525	383
	100/300	444	597	515	1093	797	984	717
	250/500	778	1046	902	1914	1395	1724	1255
	788							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	1702	2565	2022	4304	2936	3874	2642	1830
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	366	366	366	366	366	366	366	366
	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
204	308	243	516	352	465	317	220
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							
	412	580	476	1044	750	940	675	423
PART 2	PERSONAL INJURY PROTECTION							
	144	193	154	271	216	244	194	136
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	531	780	585	1262	976	1136	878
	10,000	812	1193	894	1930	1492	1737	1342
	15,000	884	1298	973	2100	1624	1890	1461
	25,000	929	1364	1023	2207	1707	1987	1536
	35,000	940	1381	1036	2235	1728	2012	1555
	50,000	945	1388	1041	2246	1737	2022	1563
	100,000	950	1395	1047	2258	1746	2032	1571
	250,000	957	1406	1055	2275	1760	2048	1583
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	55	77	63	139	100	125	90
	20/50	60	84	68	151	109	136	98
	25/50	106	149	122	269	194	242	174
	25/60	111	156	128	281	202	253	182
	35/80	200	281	230	506	364	455	327
	50/100	289	406	333	731	525	658	473
	100/300	541	760	624	1369	984	1233	886
	250/500	947	1332	1092	2399	1724	2159	1551

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	1865	3304	2207	4989	3231	4490	2908	1892
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	313	313	313	313	313	313	313	313
	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	
224	396	265	599	388	539	349	227	
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							
	383	535	453	942	661	848	595	428
PART 2	PERSONAL INJURY PROTECTION							
	142	191	159	265	206	239	185	137
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	510	732	575	1174	892	1057	803
	10,000	780	1119	879	1795	1364	1616	1228
	15,000	849	1218	957	1954	1484	1759	1336
	25,000	892	1280	1006	2053	1560	1849	1404
	35,000	903	1296	1018	2079	1580	1872	1422
	50,000	908	1303	1024	2090	1588	1881	1429
	100,000	912	1310	1029	2100	1596	1891	1437
	250,000	920	1320	1037	2117	1608	1906	1448
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	51	71	60	125	88	113	79
	20/50	55	77	65	136	95	123	86
	25/50	99	138	116	242	170	219	153
	25/60	103	144	122	253	178	228	160
	35/80	186	259	219	456	320	411	288
	50/100	268	374	317	659	463	594	416
	100/300	502	701	594	1235	867	1112	780
	250/500	880	1228	1040	2163	1519	1949	1366

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	1797	3042	2110	4743	3083	4269	2775	1769
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	310	310	310	310	310	310	310	310
	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
216	365	253	569	370	512	333	212
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 6

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	421	577	521	1031	741	928	667	422	
PART 2	PERSONAL INJURY PROTECTION								
	158	203	182	318	245	286	221	144	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	536	744	627	1244	946	1120	851	540
	10,000	820	1138	959	1902	1446	1712	1301	826
	15,000	892	1238	1043	2070	1574	1864	1416	899
	25,000	937	1301	1097	2176	1655	1959	1488	944
	35,000	949	1318	1110	2203	1675	1984	1507	956
	50,000	954	1324	1116	2214	1684	1994	1515	961
	100,000	959	1331	1122	2226	1692	2004	1522	966
	250,000	966	1341	1130	2243	1706	2019	1534	974
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	56	77	69	137	99	123	89	56
	20/50	61	84	75	149	107	134	97	61
	25/50	108	149	134	265	191	239	172	109
	25/60	113	155	140	277	200	249	180	113
	35/80	204	280	252	499	359	449	323	204
	50/100	295	404	364	721	519	649	467	295
	100/300	552	757	683	1352	973	1216	875	553
	250/500	967	1326	1196	2368	1703	2130	1533	969

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0		35/80	69		7
	20/50	51	1		50/100	78		11
	25/50	56	2		100/300	89		32
	25/60	61	3		250/500	122		111

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							
	1818	2874	2164	4717	3063	4245	2757	1798
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	371	371	371	371	371	371	371	371
	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	
218	345	260	566	368	509	331	216	
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 7

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	418	568	505	1010	757	909	681	411
PART 2	PERSONAL INJURY PROTECTION							
	196	256	220	376	323	338	291	186
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	532	736	620	1294	941	1165	847
	10,000	813	1125	948	1979	1439	1781	1295
	15,000	885	1225	1032	2153	1566	1939	1409
	25,000	930	1287	1084	2263	1646	2038	1481
	35,000	942	1303	1098	2292	1667	2063	1500
	50,000	947	1310	1104	2303	1675	2074	1508
	100,000	952	1317	1109	2315	1683	2084	1515
	250,000	959	1327	1118	2333	1697	2100	1527
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	55	75	67	134	101	121	91
	20/50	60	81	73	145	110	131	99
	25/50	107	146	130	260	195	234	176
	25/60	112	152	136	271	204	245	184
	35/80	202	274	244	489	367	440	330
	50/100	292	397	353	706	530	636	477
	100/300	547	744	662	1324	993	1192	894
	250/500	958	1303	1160	2319	1740	2088	1566

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	1807	2861	2152	4572	3315	4115	2984	1852
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	319	319	319	319	319	319	319	319
	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
217	343	258	549	398	494	358	222
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 8

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	457	628	544	1113	825	1002	743	472
PART 2	PERSONAL INJURY PROTECTION							
	202	268	225	411	298	370	268	196
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	576	830	667	1381	1077	1243	969
	10,000	881	1269	1020	2112	1647	1901	1482
	15,000	958	1381	1110	2298	1792	2068	1612
	25,000	1007	1452	1167	2415	1884	2174	1695
	35,000	1020	1470	1181	2446	1907	2201	1716
	50,000	1025	1477	1187	2458	1917	2213	1725
	100,000	1030	1485	1193	2471	1927	2224	1734
	250,000	1039	1496	1203	2490	1942	2241	1747
	1102							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	61	83	72	148	110	133	99
	20/50	66	90	78	161	119	144	107
	25/50	118	161	140	287	213	258	192
	25/60	123	168	146	299	222	269	200
	35/80	222	303	263	539	400	485	360
	50/100	320	439	380	779	578	701	520
	100/300	600	822	713	1459	1082	1313	975
	250/500	1050	1441	1249	2557	1896	2301	1707
	1085							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	2158	3380	2629	5327	4442	4794	3998	2314
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	344	344	344	344	344	344	344	344
	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
259	406	315	639	533	575	480	278
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							
	532	731	647	1358	945	1222	851	549
PART 2	PERSONAL INJURY PROTECTION							
	257	337	288	495	372	446	335	241
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	621	870	717	1434	1101	1291	991
	10,000	950	1330	1096	2193	1683	1974	1515
	15,000	1033	1448	1193	2386	1832	2148	1649
	25,000	1086	1522	1254	2508	1926	2258	1733
	35,000	1100	1541	1270	2540	1950	2286	1755
	50,000	1105	1549	1276	2553	1960	2298	1764
	100,000	1111	1556	1283	2565	1970	2310	1773
	250,000	1120	1569	1293	2586	1985	2328	1787
	1134							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	71	97	86	181	126	163	113
	20/50	77	105	93	196	137	177	123
	25/50	137	188	167	350	244	315	219
	25/60	143	196	174	366	255	329	229
	35/80	258	354	313	658	458	592	412
	50/100	373	511	453	951	662	856	595
	100/300	698	958	848	1782	1240	1603	1116
	250/500	1223	1678	1486	3120	2172	2808	1954
	1261							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	2365	3661	2785	6166	3838	5549	3454	2272
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	455	455	455	455	455	455	455	455
	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	
284	439	334	740	461	666	414	273	
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							
	504	721	609	1222	878	1100	790	518
PART 2	PERSONAL INJURY PROTECTION							
	208	296	234	412	298	371	268	195
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	574	865	669	1376	1037	1238	933
	10,000	878	1323	1023	2104	1586	1893	1427
	15,000	955	1439	1113	2290	1726	2060	1553
	25,000	1004	1513	1170	2407	1814	2165	1632
	35,000	1017	1532	1185	2437	1837	2192	1652
	50,000	1022	1540	1191	2449	1846	2204	1661
	100,000	1027	1547	1197	2462	1855	2215	1669
	250,000	1035	1560	1206	2481	1870	2232	1682
	1062							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	67	96	81	163	117	147	105
	20/50	73	104	88	177	127	159	114
	25/50	130	186	157	315	226	284	203
	25/60	136	194	164	329	236	297	212
	35/80	244	349	295	592	425	534	382
	50/100	353	505	426	856	615	771	553
	100/300	661	946	799	1603	1152	1444	1036
	250/500	1158	1656	1399	2808	2017	2529	1814
	1190							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	2046	3108	2402	5149	3520	4634	3168	2038
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	332	332	332	332	332	332	332	332
	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
246	373	288	618	422	556	380	245
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								
	634	838	851	1507	1326	1356	1193	617	
PART 2	PERSONAL INJURY PROTECTION								
	287	382	315	556	430	500	387	267	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	618	888	703	1400	1194	1260	1075	633
	10,000	945	1358	1075	2141	1826	1927	1644	968
	15,000	1028	1478	1170	2330	1987	2097	1789	1053
	25,000	1081	1553	1230	2449	2088	2204	1880	1107
	35,000	1094	1573	1245	2479	2115	2231	1904	1121
	50,000	1100	1581	1251	2492	2125	2243	1914	1127
	100,000	1106	1589	1258	2505	2136	2254	1923	1132
	250,000	1114	1601	1268	2524	2153	2272	1938	1141
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	84	112	113	201	177	181	159	83
	20/50	91	122	123	218	192	196	173	90
	25/50	163	217	219	389	342	350	308	160
	25/60	170	226	229	406	357	365	321	167
	35/80	307	407	412	730	643	657	578	300
	50/100	443	587	595	1055	929	950	835	433
	100/300	831	1100	1116	1977	1740	1779	1565	811
	250/500	1455	1927	1954	3463	3048	3117	2741	1420

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0		35/80	69	7	
	20/50	51	1		50/100	78	11	
	25/50	56	2		100/300	89	32	
	25/60	61	3		250/500	122	111	

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							
	2283	3952	2662	5532	3979	4979	3581	2253
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	354	354	354	354	354	354	354	354
	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	
274	474	319	664	477	597	430	270	
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							
	562	755	691	1358	1011	1222	910	570
PART 2	PERSONAL INJURY PROTECTION							
	238	328	279	462	359	416	323	215
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	625	909	766	1457	1127	1311	1014
	10,000	956	1390	1171	2228	1723	2005	1550
	15,000	1040	1513	1275	2424	1875	2182	1687
	25,000	1093	1590	1340	2548	1971	2293	1773
	35,000	1107	1610	1357	2580	1996	2322	1796
	50,000	1113	1618	1363	2593	2006	2334	1805
	100,000	1118	1626	1370	2607	2016	2345	1814
	250,000	1127	1639	1381	2627	2032	2364	1828
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	75	100	92	181	135	163	122
	20/50	81	109	100	196	146	177	132
	25/50	145	194	178	350	261	315	236
	25/60	151	203	186	366	273	329	246
	35/80	272	365	335	658	490	592	442
	50/100	394	528	484	951	708	856	638
	100/300	737	989	906	1782	1327	1603	1195
	250/500	1292	1733	1588	3120	2324	2808	2093

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0	35/80	69	7		
	20/50	51	1	50/100	78	11		
	25/50	56	2	100/300	89	32		
	25/60	61	3	250/500	122	111		

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							
	2594	4276	3138	6518	4629	5866	4166	2579
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	377	377	377	377	377	377	377	377
	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	
311	513	377	782	555	704	500	309	
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							
	608	827	720	1481	1065	1333	959	623
PART 2	PERSONAL INJURY PROTECTION							
	302	416	341	579	489	521	440	284
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	664	923	807	1537	1195	1383	1076
	10,000	1015	1411	1234	2350	1827	2115	1645
	15,000	1105	1536	1343	2558	1988	2301	1790
	25,000	1161	1614	1411	2688	2090	2419	1882
	35,000	1176	1635	1429	2722	2116	2449	1906
	50,000	1182	1643	1436	2736	2127	2462	1915
	100,000	1188	1651	1444	2750	2138	2474	1925
	250,000	1197	1664	1455	2771	2155	2494	1940
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	81	110	96	197	142	177	128
	20/50	88	119	104	214	154	192	139
	25/50	157	213	186	382	275	343	248
	25/60	164	222	194	398	287	358	258
	35/80	295	400	349	717	516	645	465
	50/100	426	579	504	1036	746	932	672
	100/300	798	1084	945	1942	1397	1747	1258
	250/500	1397	1900	1655	3402	2447	3061	2204

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	2398	3808	2911	6095	3966	5486	3569	2463
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	477	477	477	477	477	477	477	477
	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
288	457	349	731	476	658	428	296
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							
	616	836	718	1518	1102	1366	992	589
PART 2	PERSONAL INJURY PROTECTION							
	347	479	394	676	494	608	445	301
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	617	875	740	1451	1079	1306	971
	10,000	943	1338	1131	2219	1650	1997	1485
	15,000	1027	1456	1231	2414	1795	2173	1616
	25,000	1079	1530	1294	2538	1887	2284	1698
	35,000	1093	1550	1311	2570	1911	2313	1720
	50,000	1098	1558	1317	2583	1921	2325	1728
	100,000	1104	1565	1324	2596	1930	2336	1737
	250,000	1112	1578	1334	2616	1945	2355	1751
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	82	111	96	202	147	182	132
	20/50	89	120	104	219	159	197	143
	25/50	159	215	186	391	284	352	256
	25/60	166	225	194	408	297	368	267
	35/80	298	405	348	735	534	662	480
	50/100	431	585	503	1062	772	956	694
	100/300	808	1096	943	1991	1446	1792	1301
	250/500	1415	1920	1651	3487	2533	3139	2279

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	2533	4080	3015	6458	4584	5812	4126	2533
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	435	435	435	435	435	435	435	435
	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
304	490	362	775	550	697	495	304
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							
	713	981	840	1639	1239	1475	1115	703
PART 2	PERSONAL INJURY PROTECTION							
	328	425	358	635	469	572	422	291
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	774	1063	876	1735	1330	1562	1197
	10,000	1183	1625	1339	2653	2034	2388	1830
	15,000	1288	1769	1458	2887	2213	2599	1992
	25,000	1354	1859	1532	3035	2326	2732	2094
	35,000	1371	1883	1551	3073	2355	2766	2120
	50,000	1378	1892	1559	3088	2367	2780	2131
	100,000	1385	1902	1567	3104	2379	2794	2141
	250,000	1396	1917	1579	3128	2398	2816	2158
	1358							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	95	131	112	219	165	197	149
	20/50	103	142	122	238	179	214	162
	25/50	184	253	217	423	319	381	288
	25/60	192	264	226	442	333	398	301
	35/80	345	476	407	795	600	715	541
	50/100	499	687	588	1148	867	1033	781
	100/300	935	1287	1102	2151	1625	1936	1464
	250/500	1638	2255	1930	3768	2847	3391	2563
	1613							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	3593	5536	4078	8622	5648	7760	5083	3452
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	472	472	472	472	472	472	472	472
	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
431	664	489	1035	678	931	610	414
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.

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	691	988	825	1662	1170	1496	1053	694
PART 2	PERSONAL INJURY PROTECTION							
	411	576	454	797	598	717	538	374
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	698	1020	800	1612	1183	1451	701
	10,000	1067	1560	1223	2465	1809	2219	1072
	15,000	1161	1697	1331	2682	1969	2414	1166
	25,000	1221	1784	1399	2819	2069	2538	1226
	35,000	1236	1806	1417	2855	2095	2570	1241
	50,000	1242	1816	1424	2869	2106	2583	1248
	100,000	1249	1825	1431	2884	2116	2596	1254
	250,000	1258	1839	1442	2906	2133	2616	1264
	OPTIONAL BODILY INJURY TO OTHERS							
PART 5	20/40	92	131	110	221	156	199	92
	20/50	100	142	119	240	169	216	100
	25/50	178	254	213	428	302	385	178
	25/60	186	265	222	447	315	402	186
	35/80	335	478	400	805	567	724	336
	50/100	484	691	578	1163	819	1047	485
	100/300	906	1295	1082	2179	1535	1962	909
	250/500	1588	2268	1896	3818	2689	3436	1593

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	2926	4707	3396	7374	4755	6637	4280	2952
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	615	615	615	615	615	615	615	615
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$6							

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	
351	565	408	885	571	796	514	354	
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.

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	621	841	745	1512	1003	1361	903	560
PART 2	PERSONAL INJURY PROTECTION							
	273	356	289	498	384	448	346	251
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	652	932	718	1417	1126	1275	1013
	10,000	997	1425	1098	2167	1722	1949	1549
	15,000	1085	1551	1195	2358	1874	2122	1686
	25,000	1140	1630	1256	2478	1969	2230	1772
	35,000	1155	1651	1272	2510	1994	2258	1794
	50,000	1161	1659	1278	2522	2004	2270	1803
	100,000	1166	1667	1285	2535	2014	2281	1812
	250,000	1176	1680	1295	2555	2030	2299	1826
	642	982	1068	1123	1137	1143	1149	1158
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	83	112	99	201	133	181	120
	20/50	90	122	107	218	144	196	130
	25/50	160	217	192	389	258	351	233
	25/60	167	226	200	407	269	366	243
	35/80	301	407	361	732	485	659	437
	50/100	435	589	521	1058	701	952	632
	100/300	815	1103	977	1983	1314	1785	1184
	250/500	1428	1932	1711	3473	2303	3126	2074
	75	81	145	151	272	393	735	1288

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	2607	4280	3120	6677	4517	6009	4065	2549
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	468	468	468	468	468	468	468	468
	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	
313	514	374	801	542	721	488	306	
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							
	769	1092	840	1859	1276	1673	1148	701
PART 2	PERSONAL INJURY PROTECTION							
	457	618	480	839	618	755	556	377
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	697	967	761	1535	1187	1382	1068
	10,000	1066	1479	1164	2347	1815	2113	1633
	15,000	1160	1609	1266	2554	1975	2300	1777
	25,000	1219	1691	1331	2685	2076	2417	1868
	35,000	1234	1713	1348	2718	2102	2448	1891
	50,000	1241	1721	1355	2732	2113	2460	1901
	100,000	1247	1730	1361	2746	2124	2472	1911
	250,000	1257	1744	1372	2768	2140	2492	1926
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	102	145	112	248	170	223	153
	20/50	111	157	122	269	184	242	166
	25/50	198	281	217	480	329	432	296
	25/60	207	293	226	501	344	451	309
	35/80	372	528	407	901	618	811	556
	50/100	538	764	588	1302	893	1171	804
	100/300	1008	1431	1102	2439	1674	2195	1506
	250/500	1766	2508	1930	4272	2932	3844	2638

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	2625	4365	3122	6586	4702	5927	4232	2676
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	571	571	571	571	571	571	571	571
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$6							

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	
315	524	375	790	564	711	508	321	
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								
	752	1036	911	1860	1144	1674	1030	737	
PART 2	PERSONAL INJURY PROTECTION								
	358	488	399	708	487	637	438	351	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	665	906	774	1521	1089	1369	980	714
	10,000	1017	1385	1183	2326	1665	2093	1498	1092
	15,000	1107	1508	1288	2531	1812	2278	1631	1188
	25,000	1163	1585	1354	2660	1905	2394	1714	1249
	35,000	1178	1605	1371	2694	1929	2424	1736	1264
	50,000	1184	1613	1378	2707	1938	2437	1744	1271
	100,000	1190	1621	1385	2721	1948	2449	1753	1277
	250,000	1199	1634	1396	2742	1963	2468	1767	1287
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	100	138	121	248	153	223	138	98
	20/50	109	150	131	269	166	242	150	106
	25/50	194	267	235	480	296	432	266	190
	25/60	202	279	245	501	309	451	278	198
	35/80	364	502	441	901	555	811	500	357
	50/100	526	725	637	1302	802	1172	722	516
	100/300	986	1359	1194	2440	1502	2196	1353	966
	250/500	1727	2380	2092	4274	2630	3846	2369	1693

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0	35/80	69	7		
	20/50	51	1	50/100	78	11		
	25/50	56	2	100/300	89	32		
	25/60	61	3	250/500	122	111		

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							
	2718	4398	3350	6874	4703	6187	4233	2879
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	483	483	483	483	483	483	483	483
	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	
326	528	402	825	564	742	508	345	
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								
	853	1156	984	2080	1441	1872	1297	848	
PART 2	PERSONAL INJURY PROTECTION								
	459	636	491	901	654	811	589	410	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	747	1074	838	1707	1287	1536	1158	737
	10,000	1142	1642	1281	2610	1968	2349	1771	1127
	15,000	1243	1787	1394	2840	2142	2556	1927	1226
	25,000	1307	1878	1466	2986	2251	2686	2025	1289
	35,000	1323	1902	1484	3023	2279	2720	2051	1305
	50,000	1330	1912	1492	3038	2291	2734	2061	1312
	100,000	1336	1921	1499	3054	2302	2748	2072	1318
	250,000	1347	1936	1511	3078	2320	2769	2088	1329
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	113	154	131	277	193	249	174	113
	20/50	123	167	142	301	209	270	189	123
	25/50	219	298	254	536	373	482	336	219
	25/60	229	311	265	560	389	504	351	228
	35/80	412	560	477	1008	700	907	630	411
	50/100	596	809	689	1456	1010	1310	910	594
	100/300	1118	1516	1291	2728	1892	2455	1704	1112
	250/500	1958	2656	2261	4779	3314	4300	2984	1949

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0	35/80	69	7		
	20/50	51	1	50/100	78	11		
	25/50	56	2	100/300	89	32		
	25/60	61	3	250/500	122	111		

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							
	2928	5045	3325	6642	5058	5978	4552	2851
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	547	547	547	547	547	547	547	547
	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	
351	605	399	797	607	717	546	342	
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							
	1053	1489	1259	1813	1838	1632	1654	1066
PART 2	PERSONAL INJURY PROTECTION							
	536	740	649	1050	810	945	729	491
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	799	1118	917	1829	1413	1646	1272
	10,000	1222	1709	1402	2797	2160	2517	1945
	15,000	1330	1860	1526	3043	2351	2739	2117
	25,000	1397	1955	1604	3199	2471	2879	2225
	35,000	1415	1980	1624	3239	2502	2915	2253
	50,000	1422	1990	1632	3256	2515	2930	2264
	100,000	1429	2000	1641	3272	2528	2945	2276
	250,000	1441	2016	1653	3298	2548	2968	2293
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	140	198	168	242	245	218	221
	20/50	152	215	182	263	266	237	240
	25/50	271	384	325	468	474	422	427
	25/60	283	400	339	489	495	440	446
	35/80	510	721	610	879	891	792	802
	50/100	737	1042	882	1270	1287	1143	1159
	100/300	1381	1952	1652	2379	2411	2142	2171
	250/500	2419	3420	2894	4167	4224	3752	3802

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	3554	5501	4142	8945	5730	8051	5157	3486
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	535	535	535	535	535	535	535	535
	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	
426	660	497	1073	688	966	619	418	
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							
	1083	1459	1324	1718	1700	1546	1530	1075
PART 2	PERSONAL INJURY PROTECTION							
	481	660	590	936	802	842	722	443
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	866	1202	1118	1986	1753	1787	1578
	10,000	1324	1838	1709	3037	2680	2732	2413
	15,000	1441	2000	1860	3305	2917	2974	2626
	25,000	1515	2102	1955	3474	3066	3125	2760
	35,000	1534	2129	1980	3517	3105	3165	2795
	50,000	1541	2140	1990	3535	3120	3181	2809
	100,000	1549	2150	2000	3553	3136	3197	2823
	250,000	1561	2167	2016	3581	3161	3222	2845
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	144	194	177	229	227	206	204
	20/50	156	211	192	248	246	224	221
	25/50	279	376	342	443	439	399	395
	25/60	291	392	357	463	458	416	412
	35/80	524	706	642	833	824	749	742
	50/100	758	1021	928	1203	1191	1082	1071
	100/300	1420	1913	1738	2254	2231	2028	2007
	250/500	2488	3351	3044	3948	3908	3552	3516

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	3210	5065	4042	7851	6013	7066	5412	3154
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	616	616	616	616	616	616	616	616
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$6							

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
385	608	485	942	722	848	649	378
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.

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	870	1185	1008	2237	1451	2013	1306	862	
PART 2	PERSONAL INJURY PROTECTION								
	440	589	505	859	595	773	536	396	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	671	961	803	1624	1168	1462	1051	665
	10,000	1026	1469	1228	2483	1786	2235	1607	1017
	15,000	1117	1599	1336	2702	1944	2433	1749	1107
	25,000	1174	1681	1404	2840	2043	2557	1838	1163
	35,000	1188	1702	1422	2876	2069	2589	1861	1178
	50,000	1194	1711	1429	2891	2079	2602	1871	1184
	100,000	1200	1719	1437	2905	2090	2616	1880	1190
	250,000	1210	1733	1448	2928	2106	2636	1895	1199
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	116	158	134	299	193	269	174	115
	20/50	126	171	145	324	209	292	189	125
	25/50	224	306	260	578	374	520	337	222
	25/60	234	319	271	603	390	543	352	232
	35/80	422	574	488	1085	703	976	633	418
	50/100	609	830	705	1567	1015	1410	914	604
	100/300	1141	1555	1322	2936	1903	2642	1713	1131
	250/500	1999	2723	2315	5143	3333	4628	3001	1981

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0		35/80	69	7	
	20/50	51	1		50/100	78	11	
	25/50	56	2		100/300	89	32	
	25/60	61	3		250/500	122	111	

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							
	2839	4518	3450	7459	4832	6713	4349	2747
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	450	450	450	450	450	450	450	450
	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	
341	542	414	895	580	806	522	330	
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.

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	584	864	668	1459	951	1313	856	557
PART 2	PERSONAL INJURY PROTECTION							
	261	365	273	518	359	466	323	226
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	635	925	698	1468	1067	1321	960
	10,000	971	1414	1067	2245	1631	2020	1468
	15,000	1057	1539	1161	2443	1775	2198	1597
	25,000	1111	1618	1221	2568	1866	2310	1679
	35,000	1125	1638	1236	2600	1890	2339	1700
	50,000	1130	1647	1242	2613	1899	2351	1709
	100,000	1136	1655	1249	2626	1909	2363	1717
	250,000	1145	1668	1258	2647	1924	2382	1731
	618	945	1028	1081	1094	1100	1106	1114
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	78	115	89	195	127	176	114
	20/50	85	125	97	212	138	191	124
	25/50	151	223	172	377	246	340	221
	25/60	157	232	180	393	256	355	230
	35/80	283	418	324	708	461	638	415
	50/100	409	605	468	1022	666	921	599
	100/300	766	1133	876	1915	1248	1725	1123
	250/500	1342	1985	1535	3354	2186	3020	1967
	74	80	143	150	270	390	730	1279

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	2553	4040	3026	6537	4397	5883	3957	2466
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	289	289	289	289	289	289	289	289
	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
306	485	363	784	528	706	475	296
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.

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	645	987	706	1598	1067	1438	960	619	
PART 2	PERSONAL INJURY PROTECTION								
	347	513	356	736	481	662	433	302	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	702	1101	735	1756	1193	1580	1074	666
	10,000	1073	1683	1124	2685	1824	2416	1642	1018
	15,000	1168	1832	1223	2922	1985	2629	1787	1108
	25,000	1228	1926	1286	3071	2087	2763	1878	1165
	35,000	1243	1950	1302	3110	2113	2798	1902	1179
	50,000	1250	1960	1308	3126	2124	2812	1912	1185
	100,000	1256	1970	1315	3141	2134	2827	1921	1191
	250,000	1266	1985	1325	3166	2151	2849	1936	1201
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	86	131	94	214	143	193	129	82
	20/50	93	142	102	232	155	209	140	89
	25/50	166	254	182	413	276	372	249	159
	25/60	174	265	190	431	288	389	260	166
	35/80	313	478	342	776	518	699	467	299
	50/100	452	690	494	1120	748	1009	674	433
	100/300	846	1294	926	2098	1401	1889	1262	811
	250/500	1482	2266	1622	3675	2454	3308	2209	1421

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0		35/80	69	7	
	20/50	51	1		50/100	78	11	
	25/50	56	2		100/300	89	32	
	25/60	61	3		250/500	122	111	

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							
	2302	3973	2820	6341	3768	5707	3391	2429
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	510	510	510	510	510	510	510	510
	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	
276	477	338	761	452	685	407	291	
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.

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	657	1002	765	1549	1103	1394	993	660	
PART 2	PERSONAL INJURY PROTECTION								
	342	504	370	665	487	599	438	312	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	731	1096	821	1670	1272	1503	1145	728
	10,000	1118	1676	1255	2553	1945	2298	1751	1113
	15,000	1216	1824	1366	2779	2117	2501	1905	1211
	25,000	1279	1917	1436	2921	2225	2629	2003	1273
	35,000	1295	1941	1454	2958	2253	2662	2028	1289
	50,000	1301	1951	1461	2973	2264	2675	2038	1296
	100,000	1308	1961	1469	2988	2276	2689	2048	1302
	250,000	1318	1976	1480	3011	2293	2710	2064	1313
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	87	133	102	206	148	185	133	88
	20/50	94	144	111	224	161	201	144	95
	25/50	169	258	197	399	286	359	257	170
	25/60	176	269	206	417	298	374	268	178
	35/80	318	485	371	750	536	674	482	320
	50/100	459	701	536	1084	774	975	696	462
	100/300	861	1313	1004	2031	1449	1827	1304	866
	250/500	1508	2301	1758	3558	2537	3201	2284	1517

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0		35/80	69	7	
	20/50	51	1		50/100	78	11	
	25/50	56	2		100/300	89	32	
	25/60	61	3		250/500	122	111	

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							
	3570	6638	4288	8970	6297	8073	5667	3557
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	652	652	652	652	652	652	652	652
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$7							

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	
428	797	515	1076	756	969	680	427	
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							
	272	357	329	615	466	554	419	272
PART 2	PERSONAL INJURY PROTECTION							
	99	129	113	191	141	172	127	92
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	400	549	483	975	716	878	644
	10,000	612	839	739	1491	1095	1342	985
	15,000	666	914	804	1622	1191	1461	1072
	25,000	700	960	845	1705	1252	1536	1126
	35,000	708	972	855	1727	1268	1555	1141
	50,000	712	977	860	1736	1274	1563	1146
	100,000	716	982	864	1744	1281	1571	1152
	250,000	721	990	871	1758	1291	1583	1161
	770							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	36	47	43	82	62	74	56
	20/50	39	51	47	89	67	80	61
	25/50	70	91	84	159	120	143	108
	25/60	73	95	88	166	125	149	113
	35/80	131	172	158	298	226	269	203
	50/100	190	249	229	431	326	388	294
	100/300	356	467	430	807	611	727	550
	250/500	624	819	754	1413	1070	1273	963
	624							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	1560	2365	1891	3756	2715	3380	2444	1511
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	277	277	277	277	277	277	277	277
	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
187	284	227	451	326	406	293	181
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.

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	778	1036	920	1878	1321	1690	1189	771
PART 2	PERSONAL INJURY PROTECTION							
	430	570	476	824	619	742	557	387
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	540	746	611	1253	903	1128	813
	10,000	826	1141	934	1916	1381	1725	1243
	15,000	899	1241	1017	2085	1503	1877	1353
	25,000	944	1305	1069	2191	1579	1973	1422
	35,000	956	1321	1082	2219	1599	1998	1440
	50,000	961	1328	1088	2230	1607	2008	1447
	100,000	966	1335	1093	2242	1615	2018	1454
	250,000	974	1345	1102	2259	1628	2034	1466
	965							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	103	138	122	250	177	225	159
	20/50	112	150	132	271	192	244	172
	25/50	200	267	237	484	342	436	307
	25/60	209	279	247	505	357	455	321
	35/80	376	502	445	910	641	819	577
	50/100	544	725	643	1314	926	1183	833
	100/300	1019	1359	1206	2463	1735	2217	1561
	250/500	1786	2380	2112	4314	3038	3883	2734
	1772							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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 3		PART 12		PART 3	
	20/40	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122
						111

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							
	1858	3024	2304	4940	3137	4446	2823	1851
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	466	466	466	466	466	466	466	466
	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
223	363	276	593	376	534	339	222
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							
	553	754	668	1362	962	1226	866	567
PART 2	PERSONAL INJURY PROTECTION							
	285	381	316	586	407	527	366	266
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	575	801	731	1308	1004	1177	904
	10,000	879	1225	1118	2000	1535	1800	1382
	15,000	957	1333	1216	2177	1671	1959	1504
	25,000	1006	1401	1279	2288	1756	2059	1581
	35,000	1018	1419	1295	2316	1778	2084	1601
	50,000	1024	1426	1301	2328	1787	2095	1609
	100,000	1029	1433	1308	2340	1796	2106	1617
	250,000	1037	1444	1318	2358	1810	2122	1630
	1064							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	73	100	89	181	128	163	115
	20/50	79	109	97	196	139	177	125
	25/50	142	194	172	351	248	316	223
	25/60	148	202	180	366	259	330	233
	35/80	267	365	324	659	466	594	419
	50/100	386	527	468	953	673	858	606
	100/300	724	988	876	1786	1262	1608	1135
	250/500	1269	1731	1535	3128	2210	2816	1989
	1301							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	2300	3501	2732	5872	3939	5285	3545	2288
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	301	301	301	301	301	301	301	301
	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	
276	420	328	705	473	634	425	275	
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.

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	897	1301	1094	2052	1573	1847	1416	815
PART 2	PERSONAL INJURY PROTECTION							
	475	711	567	1034	678	931	610	390
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	547	773	638	1292	953	1163	858
	10,000	836	1182	976	1975	1457	1778	1312
	15,000	910	1286	1062	2150	1586	1935	1428
	25,000	957	1352	1116	2260	1667	2034	1501
	35,000	969	1369	1130	2288	1688	2060	1520
	50,000	974	1376	1136	2300	1696	2070	1527
	100,000	979	1383	1141	2311	1705	2081	1535
	250,000	986	1394	1150	2329	1718	2097	1547
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	119	173	146	274	210	247	189
	20/50	129	188	158	297	228	268	205
	25/50	231	335	282	530	406	477	366
	25/60	241	350	295	553	424	498	382
	35/80	434	630	530	995	763	896	687
	50/100	627	910	766	1437	1102	1294	992
	100/300	1176	1706	1436	2693	2064	2425	1858
	250/500	2060	2988	2514	4717	3616	4247	3255

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0		35/80	69
	20/50	51	1		50/100	78
	25/50	56	2		100/300	89
	25/60	61	3		250/500	122

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							
	1866	3180	2258	4719	3180	4247	2862	1853
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	440	440	440	440	440	440	440	440
	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
224	382	271	566	382	510	343	222
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.

MANUAL RATE	CLASS								
	10	17	18	20	21	25	26	30	
PART 1	BODILY INJURY TO OTHERS								
	695	962	854	1664	1226	1498	1103	700	
PART 2	PERSONAL INJURY PROTECTION								
	328	445	374	654	473	589	426	302	
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY								
	5,000	710	1023	833	1639	1227	1475	1104	712
	10,000	1086	1564	1274	2506	1876	2255	1688	1089
	15,000	1181	1702	1386	2727	2042	2454	1837	1185
	25,000	1242	1789	1457	2867	2146	2580	1931	1245
	35,000	1257	1812	1475	2903	2173	2612	1955	1261
	50,000	1264	1821	1483	2917	2184	2626	1965	1267
	100,000	1270	1830	1490	2932	2195	2639	1975	1274
	250,000	1280	1844	1502	2955	2212	2659	1991	1284
PART 5	OPTIONAL BODILY INJURY TO OTHERS								
	20/40	92	128	114	222	163	200	147	93
	20/50	100	139	124	241	177	217	160	101
	25/50	179	248	220	429	316	387	285	180
	25/60	186	259	230	448	330	404	297	188
	35/80	336	466	414	807	594	726	535	339
	50/100	486	673	598	1165	858	1049	772	490
	100/300	910	1262	1121	2183	1608	1966	1447	918
	250/500	1595	2210	1963	3824	2816	3443	2535	1608

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	
	20/40	50	0		35/80	69	7	
	20/50	51	1		50/100	78	11	
	25/50	56	2		100/300	89	32	
	25/60	61	3		250/500	122	111	

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							
	3064	4699	3556	7647	5393	6882	4854	2939
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	664	664	664	664	664	664	664	664
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$7							

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	
368	564	427	918	647	826	582	353	
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.

MANUAL RATE	CLASS							
	10	17	18	20	21	25	26	30
PART 1	BODILY INJURY TO OTHERS							
	596	816	723	1485	1112	1337	1001	632
PART 2	PERSONAL INJURY PROTECTION							
	277	386	312	554	415	499	374	268
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	557	782	660	1283	1012	1155	911
	10,000	852	1196	1009	1962	1547	1766	1393
	15,000	927	1301	1098	2135	1684	1922	1516
	25,000	974	1368	1154	2244	1770	2020	1593
	35,000	986	1385	1169	2272	1792	2046	1613
	50,000	991	1392	1175	2284	1801	2056	1622
	100,000	996	1399	1181	2295	1810	2066	1630
	250,000	1004	1410	1190	2313	1825	2082	1643
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	79	108	96	198	148	178	133
	20/50	86	117	104	215	161	193	144
	25/50	153	210	186	383	287	345	258
	25/60	160	219	194	400	299	360	269
	35/80	288	394	350	720	539	648	485
	50/100	417	570	506	1040	778	936	700
	100/300	781	1069	948	1948	1458	1754	1312
	250/500	1368	1873	1660	3413	2555	3072	2299

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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		50		35/80	
	20/50		51		50/100	
	25/50		56		100/300	
	25/60		61		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							
	2073	3531	2527	5286	3665	4757	3299	2175
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	372	372	372	372	372	372	372	372
	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	
249	424	303	634	440	571	396	261	
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							
	1052	1453	1284	1745	1901	1571	1711	1067
PART 2	PERSONAL INJURY PROTECTION							
	596	810	658	1165	874	1049	787	549
PART 4	DAMAGE TO SOMEONE ELSE'S PROPERTY							
	5,000	789	1078	983	1865	1395	1679	1256
	10,000	1206	1648	1503	2852	2133	2567	1920
	15,000	1313	1794	1636	3103	2321	2794	2090
	25,000	1380	1885	1719	3262	2440	2937	2197
	35,000	1397	1909	1741	3303	2471	2974	2224
	50,000	1404	1919	1750	3320	2483	2989	2236
	100,000	1412	1929	1759	3336	2496	3004	2247
	250,000	1423	1944	1772	3363	2515	3027	2265
	1439							
PART 5	OPTIONAL BODILY INJURY TO OTHERS							
	20/40	140	194	171	233	253	210	228
	20/50	152	210	186	253	275	228	247
	25/50	271	375	331	451	490	406	441
	25/60	283	392	346	470	511	424	461
	35/80	510	705	622	846	921	762	829
	50/100	736	1018	899	1222	1330	1101	1198
	100/300	1380	1907	1684	2290	2493	2062	2245
	250/500	2417	3340	2950	4011	4367	3612	3931
	2451							

PART 6	MEDICAL PAYMENTS				
	5,000	10,000	15,000	20,000	25,000
	111	174	222	254	278

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	50	0	35/80	69
	20/50	51	1	50/100	78
	25/50	56	2	100/300	89
	25/60	61	3	250/500	122

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							
	3304	5066	4039	8791	5628	7912	5065	3282
PART 9	COMPREHENSIVE - \$500 DEDUCTIBLE							
	618	618	618	618	618	618	618	618
	Additional Charge to Reduce Deductible From \$500 to \$300 -- \$6							

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
396	608	485	1055	675	949	608	394
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	2026	2025	2024	2023	2022	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011 & Prior
11	0.782	0.745	0.708	0.671	0.641	0.611	0.581	0.540	0.499	0.458	0.421	0.384	0.350	0.317	0.283	0.253
12	0.805	0.767	0.729	0.690	0.660	0.629	0.598	0.556	0.514	0.472	0.433	0.395	0.360	0.326	0.291	0.261
13	0.830	0.790	0.751	0.711	0.679	0.648	0.616	0.573	0.529	0.486	0.446	0.407	0.371	0.336	0.300	0.269
14	0.855	0.814	0.773	0.733	0.700	0.667	0.635	0.590	0.545	0.501	0.460	0.419	0.383	0.346	0.309	0.277
15	0.880	0.838	0.796	0.754	0.721	0.687	0.654	0.608	0.561	0.515	0.473	0.432	0.394	0.356	0.318	0.285
16	0.906	0.863	0.820	0.777	0.742	0.708	0.673	0.626	0.578	0.531	0.488	0.444	0.406	0.367	0.328	0.293
17	0.933	0.889	0.845	0.800	0.765	0.729	0.693	0.645	0.596	0.547	0.502	0.458	0.418	0.378	0.338	0.302
18	0.962	0.916	0.870	0.824	0.788	0.751	0.714	0.664	0.614	0.563	0.518	0.472	0.431	0.389	0.348	0.311
19	0.990	0.943	0.896	0.849	0.811	0.773	0.736	0.684	0.632	0.580	0.533	0.486	0.443	0.401	0.358	0.321
20	1.020	0.971	0.922	0.874	0.835	0.796	0.757	0.704	0.651	0.597	0.549	0.500	0.456	0.413	0.369	0.330
21	1.050	1.000	0.950	0.900	0.860	0.820	0.780	0.725	0.670	0.615	0.565	0.515	0.470	0.425	0.380	0.340
22	1.082	1.030	0.979	0.927	0.886	0.845	0.803	0.747	0.690	0.633	0.582	0.530	0.484	0.438	0.391	0.350
23	1.114	1.061	1.008	0.955	0.912	0.870	0.828	0.769	0.711	0.653	0.599	0.546	0.499	0.451	0.403	0.361
24	1.148	1.093	1.038	0.984	0.940	0.896	0.853	0.792	0.732	0.672	0.618	0.563	0.514	0.465	0.415	0.372
25	1.182	1.126	1.070	1.013	0.968	0.923	0.878	0.816	0.754	0.692	0.636	0.580	0.529	0.479	0.428	0.383
26	1.218	1.160	1.102	1.044	0.998	0.951	0.905	0.841	0.777	0.713	0.655	0.597	0.545	0.493	0.441	0.394
27	1.255	1.195	1.135	1.076	1.028	0.980	0.932	0.866	0.801	0.735	0.675	0.615	0.562	0.508	0.454	0.406
28	1.293	1.231	1.169	1.108	1.059	1.009	0.960	0.892	0.825	0.757	0.696	0.634	0.579	0.523	0.468	0.419
29	1.331	1.268	1.205	1.141	1.090	1.040	0.989	0.919	0.850	0.780	0.716	0.653	0.596	0.539	0.482	0.431
30	1.371	1.306	1.241	1.175	1.123	1.071	1.019	0.947	0.875	0.803	0.738	0.673	0.614	0.555	0.496	0.444
31	1.412	1.345	1.278	1.211	1.157	1.103	1.049	0.975	0.901	0.827	0.760	0.693	0.632	0.572	0.511	0.457
32	1.454	1.385	1.316	1.247	1.191	1.136	1.080	1.004	0.928	0.852	0.783	0.713	0.651	0.589	0.526	0.471
33	1.498	1.427	1.356	1.284	1.227	1.170	1.113	1.035	0.956	0.878	0.806	0.735	0.671	0.606	0.542	0.485
34	1.544	1.470	1.397	1.323	1.264	1.205	1.147	1.066	0.985	0.904	0.831	0.757	0.691	0.625	0.559	0.500
35	1.590	1.514	1.438	1.363	1.302	1.241	1.181	1.098	1.014	0.931	0.855	0.780	0.712	0.643	0.575	0.515
36	1.637	1.559	1.481	1.403	1.341	1.278	1.216	1.130	1.045	0.959	0.881	0.803	0.733	0.663	0.592	0.530
37	1.686	1.606	1.526	1.445	1.381	1.317	1.253	1.164	1.076	0.988	0.907	0.827	0.755	0.683	0.610	0.546
38	1.737	1.654	1.571	1.489	1.422	1.356	1.290	1.199	1.108	1.017	0.935	0.852	0.777	0.703	0.629	0.562
39	1.789	1.704	1.619	1.534	1.465	1.397	1.329	1.235	1.142	1.048	0.963	0.878	0.801	0.724	0.648	0.579
40	1.843	1.755	1.667	1.580	1.509	1.439	1.369	1.272	1.176	1.079	0.992	0.904	0.825	0.746	0.667	0.597
41	1.898	1.808	1.718	1.627	1.555	1.483	1.410	1.311	1.211	1.112	1.022	0.931	0.850	0.768	0.687	0.615
42	1.955	1.862	1.769	1.676	1.601	1.527	1.452	1.350	1.248	1.145	1.052	0.959	0.875	0.791	0.708	0.633
43	2.014	1.918	1.822	1.726	1.649	1.573	1.496	1.391	1.285	1.180	1.084	0.988	0.901	0.815	0.729	0.652
44	2.075	1.976	1.877	1.778	1.699	1.620	1.541	1.433	1.324	1.215	1.116	1.018	0.929	0.840	0.751	0.672
45	2.137	2.035	1.933	1.832	1.750	1.669	1.587	1.475	1.363	1.252	1.150	1.048	0.956	0.865	0.773	0.692
46	2.201	2.096	1.991	1.886	1.803	1.719	1.635	1.520	1.404	1.289	1.184	1.079	0.985	0.891	0.796	0.713
47	2.267	2.159	2.051	1.943	1.857	1.770	1.684	1.565	1.447	1.328	1.220	1.112	1.015	0.918	0.820	0.734
48	2.335	2.224	2.113	2.002	1.913	1.824	1.735	1.612	1.490	1.368	1.257	1.145	1.045	0.945	0.845	0.756
49	2.406	2.291	2.176	2.062	1.970	1.879	1.787	1.661	1.535	1.409	1.294	1.180	1.077	0.974	0.871	0.779
50	2.478	2.360	2.242	2.124	2.030	1.935	1.841	1.711	1.581	1.451	1.333	1.215	1.109	1.003	0.897	0.802

For the calculation of Rate Relativities for VRG 50, refer to Rule 22 E.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

Model Year/VRG Relativities

COMPREHENSIVE

	Model Year															2011 & Prior
VRG	206	2025	2024	2023	2022	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012	
11	0.706	0.676	0.648	0.621	0.594	0.569	0.546	0.523	0.500	0.479	0.459	0.439	0.421	0.404	0.387	0.370
12	0.734	0.703	0.673	0.645	0.618	0.592	0.567	0.543	0.520	0.498	0.477	0.457	0.438	0.420	0.402	0.385
13	0.763	0.731	0.700	0.671	0.643	0.616	0.590	0.565	0.541	0.518	0.496	0.475	0.455	0.436	0.418	0.401
14	0.793	0.760	0.728	0.698	0.668	0.640	0.613	0.587	0.562	0.539	0.516	0.494	0.473	0.454	0.435	0.416
15	0.825	0.790	0.757	0.725	0.694	0.665	0.638	0.611	0.585	0.560	0.536	0.514	0.492	0.472	0.452	0.433
16	0.858	0.822	0.787	0.755	0.723	0.692	0.663	0.635	0.608	0.583	0.558	0.534	0.512	0.491	0.470	0.450
17	0.893	0.855	0.819	0.785	0.752	0.720	0.690	0.661	0.633	0.606	0.581	0.556	0.533	0.510	0.489	0.469
18	0.928	0.889	0.852	0.816	0.781	0.749	0.717	0.687	0.658	0.630	0.604	0.578	0.554	0.531	0.509	0.487
19	0.966	0.925	0.886	0.849	0.813	0.779	0.746	0.715	0.685	0.656	0.628	0.601	0.576	0.552	0.529	0.507
20	1.004	0.962	0.922	0.883	0.846	0.810	0.776	0.744	0.712	0.682	0.653	0.625	0.599	0.574	0.550	0.527
21	1.044	1.000	0.958	0.918	0.879	0.842	0.807	0.773	0.740	0.709	0.679	0.650	0.623	0.597	0.572	0.548
22	1.086	1.040	0.996	0.955	0.914	0.876	0.839	0.804	0.770	0.737	0.706	0.676	0.648	0.621	0.595	0.570
23	1.130	1.082	1.037	0.993	0.951	0.911	0.873	0.836	0.801	0.767	0.735	0.703	0.674	0.646	0.619	0.593
24	1.175	1.125	1.078	1.033	0.989	0.947	0.908	0.870	0.833	0.798	0.764	0.731	0.701	0.672	0.644	0.617
25	1.221	1.170	1.121	1.074	1.028	0.985	0.944	0.904	0.866	0.830	0.794	0.761	0.729	0.698	0.669	0.641
26	1.271	1.217	1.166	1.117	1.070	1.025	0.982	0.941	0.901	0.863	0.826	0.791	0.758	0.727	0.696	0.667
27	1.322	1.266	1.213	1.162	1.113	1.066	1.022	0.979	0.937	0.898	0.860	0.823	0.789	0.756	0.724	0.694
28	1.375	1.317	1.262	1.209	1.158	1.109	1.063	1.018	0.975	0.934	0.894	0.856	0.820	0.786	0.753	0.722
29	1.430	1.370	1.312	1.258	1.204	1.154	1.106	1.059	1.014	0.971	0.930	0.891	0.854	0.818	0.784	0.751
30	1.488	1.425	1.365	1.308	1.253	1.200	1.150	1.102	1.055	1.010	0.968	0.926	0.888	0.851	0.815	0.781
31	1.547	1.482	1.420	1.360	1.303	1.248	1.196	1.146	1.097	1.051	1.006	0.963	0.923	0.885	0.848	0.812
32	1.609	1.541	1.476	1.415	1.355	1.298	1.244	1.191	1.140	1.093	1.046	1.002	0.960	0.920	0.881	0.844
33	1.674	1.603	1.536	1.472	1.409	1.350	1.294	1.239	1.186	1.137	1.088	1.042	0.999	0.957	0.917	0.878
34	1.740	1.667	1.597	1.530	1.465	1.404	1.345	1.289	1.234	1.182	1.132	1.084	1.039	0.995	0.954	0.914
35	1.810	1.734	1.661	1.592	1.524	1.460	1.399	1.340	1.283	1.229	1.177	1.127	1.080	1.035	0.992	0.950
36	1.882	1.803	1.727	1.655	1.585	1.518	1.455	1.394	1.334	1.278	1.224	1.172	1.123	1.076	1.031	0.988
37	1.958	1.875	1.796	1.721	1.648	1.579	1.513	1.449	1.388	1.329	1.273	1.219	1.168	1.119	1.073	1.028
38	2.036	1.950	1.868	1.790	1.714	1.642	1.574	1.507	1.443	1.383	1.324	1.268	1.215	1.164	1.115	1.069
39	2.117	2.028	1.943	1.862	1.783	1.708	1.637	1.568	1.501	1.438	1.377	1.318	1.263	1.211	1.160	1.111
40	2.202	2.109	2.020	1.936	1.854	1.776	1.702	1.630	1.561	1.495	1.432	1.371	1.314	1.259	1.206	1.156
41	2.289	2.193	2.101	2.013	1.928	1.847	1.770	1.695	1.623	1.555	1.489	1.425	1.366	1.309	1.254	1.202
42	2.381	2.281	2.185	2.094	2.005	1.921	1.841	1.763	1.688	1.617	1.549	1.483	1.421	1.362	1.305	1.250
43	2.476	2.372	2.272	2.177	2.085	1.997	1.914	1.834	1.755	1.682	1.611	1.542	1.478	1.416	1.357	1.300
44	2.576	2.467	2.363	2.265	2.168	2.077	1.991	1.907	1.826	1.749	1.675	1.604	1.537	1.473	1.411	1.352
45	2.679	2.566	2.458	2.356	2.256	2.161	2.071	1.984	1.899	1.819	1.742	1.668	1.599	1.532	1.468	1.406
46	2.786	2.669	2.557	2.450	2.346	2.247	2.154	2.063	1.975	1.892	1.812	1.735	1.663	1.593	1.527	1.463
47	2.898	2.776	2.659	2.548	2.440	2.337	2.240	2.146	2.054	1.968	1.885	1.804	1.729	1.657	1.588	1.521
48	3.014	2.887	2.766	2.650	2.538	2.431	2.330	2.232	2.136	2.047	1.960	1.877	1.799	1.724	1.651	1.582
49	3.134	3.002	2.876	2.756	2.639	2.528	2.423	2.321	2.221	2.128	2.038	1.951	1.870	1.792	1.717	1.645
50	3.259	3.122	2.991	2.866	2.744	2.629	2.519	2.413	2.310	2.213	2.120	2.029	1.945	1.864	1.786	1.711

For the calculation of Rate Relativities for VRG 50, refer to Rule 22 E.

MASSACHUSETTS PRIVATE PASSENGER RESIDUAL MARKET AUTOMOBILE INSURANCE MANUAL

VRG ASSIGNMENT BY PRICE LIST (RULE 22)

RULE 22	COLLISION				COMPREHENSIVE	
	Vans/Wagons/Pickups		All Other Vehicles		All Vehicles	
	VRG	Base List Price	VRG	Base List Price	VRG	Base List Price
	11	\$0 - \$8,000	11	\$0 - \$7,000	11	\$0 - \$7,000
	12	\$8,001 - \$9,000	12	\$7,001 - \$7,500	12	\$7,001 - \$8,000
	13	\$9,001 - \$10,000	13	\$7,501 - \$8,000	13	\$8,001 - \$9,000
	14	\$10,001 - \$11,000	14	\$8,001 - \$8,500	14	\$9,001 - \$10,000
	15	\$11,001 - \$12,000	15	\$8,501 - \$9,000	15	\$10,001 - \$11,000
	16	\$12,001 - \$13,000	16	\$9,001 - \$9,500	16	\$11,001 - \$12,000
	17	\$13,001 - \$14,000	17	\$9,501 - \$10,000	17	\$12,001 - \$13,000
	18	\$14,001 - \$16,000	18	\$10,001 - \$10,500	18	\$13,001 - \$14,000
	19	\$16,001 - \$18,000	19	\$10,501 - \$11,000	19	\$14,001 - \$15,000
	20	\$18,001 - \$20,000	20	\$11,001 - \$11,500	20	\$15,001 - \$16,000
	21	\$20,001 - \$23,000	21	\$11,501 - \$12,000	21	\$16,001 - \$17,000
	22	\$23,001 - \$26,000	22	\$12,001 - \$13,500	22	\$17,001 - \$18,000
	23	\$26,001 - \$29,000	23	\$13,501 - \$15,000	23	\$18,001 - \$19,000
	24	\$29,001 - \$33,000	24	\$15,001 - \$17,500	24	\$19,001 - \$20,000
	25	\$33,001 - \$37,000	25	\$17,501 - \$20,000	25	\$20,001 - \$22,500
	26	\$37,001 - \$41,000	26	\$20,001 - \$22,500	26	\$22,501 - \$25,000
	27	\$41,001 - \$45,000	27	\$22,501 - \$25,000	27	\$25,001 - \$27,500
	28	\$45,001 - \$49,000	28	\$25,001 - \$27,500	28	\$27,501 - \$30,000
	29	\$49,001 - \$53,000	29	\$27,501 - \$30,000	29	\$30,001 - \$32,500
	30	\$53,001 - \$57,000	30	\$30,001 - \$33,000	30	\$32,501 - \$35,000
	31	\$57,001 - \$61,000	31	\$33,001 - \$36,000	31	\$35,001 - \$37,000
	32	\$61,001 - \$65,000	32	\$36,001 - \$39,000	32	\$37,001 - \$39,000
	33	\$65,001 - \$70,000	33	\$39,001 - \$42,000	33	\$39,001 - \$41,000
	34	\$70,001 - \$75,000	34	\$42,001 - \$45,000	34	\$41,001 - \$43,000
	35	\$75,001 - \$80,000	35	\$45,001 - \$48,000	35	\$43,001 - \$45,000
	36	\$80,001 - \$84,000	36	\$48,001 - \$52,000	36	\$45,001 - \$47,000
	37	\$84,001 - \$88,000	37	\$52,001 - \$56,000	37	\$47,001 - \$49,000
	38	\$88,001 - \$92,000	38	\$56,001 - \$60,000	38	\$49,001 - \$51,000
	39	\$92,001 - \$96,000	39	\$60,001 - \$64,000	39	\$51,001 - \$53,000
	40	\$96,001 - \$100,000	40	\$64,001 - \$68,000	40	\$53,001 - \$55,000
	41	\$100,001 - \$104,000	41	\$68,001 - \$72,000	41	\$55,001 - \$57,000
	42	\$104,001 - \$108,000	42	\$72,001 - \$76,000	42	\$57,001 - \$59,000
	43	\$108,001 - \$112,000	43	\$76,001 - \$80,000	43	\$59,001 - \$61,000
	44	\$112,001 - \$116,000	44	\$80,001 - \$84,000	44	\$61,001 - \$63,000
	45	\$116,001 - \$120,000	45	\$84,001 - \$88,000	45	\$63,001 - \$65,000
	46	\$120,001 - \$125,000	46	\$88,001 - \$92,000	46	\$65,001 - \$67,000
	47	\$125,001 - \$130,000	47	\$92,001 - \$96,000	47	\$67,001 - \$69,000
	48	\$130,001 - \$135,000	48	\$96,001 - \$100,000	48	\$69,001 - \$71,000
	49	\$135,001 - \$140,000	49	\$100,001 - \$105,000	49	\$71,001 - \$73,000
	50	\$140,001 - \$145,000	50	\$105,001 - \$110,000	50	\$73,001 - \$75,000
VRG 50	Factor 0.020	Maximum Price \$145,000	Factor 0.025	Maximum Price \$110,000	Factor 0.035	Maximum Price \$75,000

For VRG 50 relativities:

- 1) Subtract the Maximum Price above from the Base List Price and divide by \$1000.
- 2) Multiply the amount in Step 1 by the factor above.
- 3) The adjusted VRG relativity is determined by adding the amount from Step 2 to the unadjusted VRG 50 rate relativity.

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	\$4,000	11	\$3,500	11	\$3,500
12	\$8,500	12	\$7,250	12	\$7,500
13	\$9,500	13	\$7,750	13	\$8,500
14	\$10,500	14	\$8,250	14	\$9,500
15	\$11,500	15	\$8,750	15	\$10,500
16	\$12,500	16	\$9,250	16	\$11,500
17	\$13,500	17	\$9,750	17	\$12,500
18	\$15,000	18	\$10,250	18	\$13,500
19	\$17,000	19	\$10,750	19	\$14,500
20	\$19,000	20	\$11,250	20	\$15,500
21	\$21,500	21	\$11,750	21	\$16,500
22	\$24,500	22	\$12,750	22	\$17,500
23	\$27,500	23	\$14,250	23	\$18,500
24	\$31,000	24	\$16,250	24	\$19,500
25	\$35,000	25	\$18,750	25	\$21,250
26	\$39,000	26	\$21,250	26	\$23,750
27	\$43,000	27	\$23,750	27	\$26,250
28	\$47,000	28	\$26,250	28	\$28,750
29	\$51,000	29	\$28,750	29	\$31,250
30	\$55,000	30	\$31,500	30	\$33,750
31	\$59,000	31	\$34,500	31	\$36,000
32	\$63,000	32	\$37,500	32	\$38,000
33	\$67,500	33	\$40,500	33	\$40,000
34	\$72,500	34	\$43,500	34	\$42,000
35	\$77,500	35	\$46,500	35	\$44,000
36	\$82,000	36	\$50,000	36	\$46,000
37	\$86,000	37	\$54,000	37	\$48,000
38	\$90,000	38	\$58,000	38	\$50,000
39	\$94,000	39	\$62,000	39	\$52,000
40	\$98,000	40	\$66,000	40	\$54,000
41	\$102,000	41	\$70,000	41	\$56,000
42	\$106,000	42	\$74,000	42	\$58,000
43	\$110,000	43	\$78,000	43	\$60,000
44	\$114,000	44	\$82,000	44	\$62,000
45	\$118,000	45	\$86,000	45	\$64,000
46	\$122,500	46	\$90,000	46	\$66,000
47	\$127,500	47	\$94,000	47	\$68,000
48	\$132,500	48	\$98,000	48	\$70,000
49	\$137,500	49	\$102,500	49	\$72,000
50	\$142,500	50	\$107,500	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	5.87	7.58	7.38	6.31	6.25	7.48	6.43	6.94	9.18	6.70	7.14	7.60	9.62	8.77	9.52	12.41	9.44
12	2.85	3.68	3.58	3.06	3.03	3.63	3.12	3.37	4.45	3.25	3.46	3.69	4.67	4.26	4.62	6.02	4.58
13	2.61	3.38	3.29	2.81	2.78	3.33	2.86	3.09	4.08	2.98	3.18	3.38	4.28	3.90	4.24	5.52	4.20
14	2.43	3.14	3.06	2.61	2.59	3.10	2.66	2.87	3.80	2.77	2.95	3.15	3.98	3.63	3.94	5.13	3.91
15	2.29	2.95	2.88	2.46	2.44	2.92	2.51	2.70	3.58	2.61	2.78	2.96	3.75	3.42	3.71	4.83	3.68
16	2.17	2.81	2.73	2.34	2.31	2.77	2.38	2.57	3.39	2.48	2.64	2.81	3.56	3.25	3.52	4.59	3.49
17	2.08	2.69	2.61	2.24	2.21	2.65	2.28	2.46	3.25	2.37	2.53	2.69	3.41	3.11	3.37	4.39	3.34
18	2.00	2.58	2.52	2.15	2.13	2.55	2.19	2.36	3.13	2.28	2.43	2.59	3.28	2.99	3.24	4.23	3.22
19	1.94	2.50	2.44	2.09	2.07	2.47	2.13	2.29	3.03	2.21	2.36	2.51	3.18	2.90	3.14	4.10	3.12
20	1.88	2.44	2.37	2.03	2.01	2.40	2.07	2.23	2.95	2.15	2.29	2.44	3.09	2.82	3.06	3.98	3.03
21	1.84	2.38	2.32	1.98	1.96	2.35	2.02	2.18	2.88	2.10	2.24	2.39	3.02	2.75	2.99	3.89	2.96
22	1.81	2.33	2.27	1.94	1.92	2.30	1.98	2.13	2.82	2.06	2.20	2.34	2.96	2.70	2.93	3.82	2.90
23	1.78	2.30	2.24	1.91	1.89	2.27	1.95	2.10	2.78	2.03	2.16	2.30	2.91	2.66	2.88	3.76	2.86
24	1.75	2.27	2.21	1.89	1.87	2.24	1.92	2.07	2.74	2.00	2.13	2.27	2.87	2.62	2.84	3.71	2.82
25	1.67	2.16	2.10	1.80	1.78	2.13	1.83	1.98	2.61	1.91	2.03	2.17	2.74	2.50	2.71	3.53	2.69
26	1.56	2.01	1.96	1.68	1.66	1.99	1.71	1.84	2.43	1.78	1.89	2.02	2.55	2.33	2.53	3.29	2.50
27	1.47	1.89	1.84	1.58	1.56	1.87	1.61	1.73	2.29	1.67	1.78	1.90	2.40	2.19	2.38	3.10	2.36
28	1.39	1.80	1.75	1.50	1.48	1.77	1.53	1.65	2.18	1.59	1.69	1.80	2.28	2.08	2.26	2.94	2.24
29	1.33	1.72	1.67	1.43	1.42	1.70	1.46	1.57	2.08	1.52	1.62	1.73	2.18	1.99	2.16	2.81	2.14
30	1.28	1.66	1.61	1.38	1.37	1.64	1.41	1.52	2.01	1.46	1.56	1.66	2.10	1.92	2.08	2.71	2.06
31	1.25	1.62	1.57	1.35	1.33	1.59	1.37	1.48	1.96	1.43	1.52	1.62	2.05	1.87	2.03	2.64	2.01
32	1.23	1.59	1.55	1.33	1.31	1.57	1.35	1.46	1.93	1.41	1.50	1.60	2.02	1.84	2.00	2.60	1.98
33	1.22	1.57	1.53	1.31	1.30	1.55	1.34	1.44	1.90	1.39	1.48	1.58	2.00	1.82	1.98	2.57	1.96
34	1.21	1.56	1.52	1.30	1.28	1.54	1.32	1.43	1.89	1.38	1.47	1.56	1.98	1.80	1.96	2.55	1.94
35	1.20	1.55	1.51	1.29	1.28	1.53	1.31	1.42	1.87	1.37	1.46	1.55	1.96	1.79	1.94	2.53	1.93
36	1.19	1.54	1.50	1.28	1.27	1.52	1.31	1.41	1.86	1.36	1.45	1.54	1.95	1.78	1.93	2.52	1.91
37	1.19	1.53	1.49	1.28	1.26	1.51	1.30	1.40	1.86	1.35	1.44	1.54	1.95	1.77	1.93	2.51	1.91
38	1.18	1.53	1.49	1.27	1.26	1.51	1.30	1.40	1.85	1.35	1.44	1.54	1.94	1.77	1.92	2.50	1.91
39	1.18	1.53	1.49	1.27	1.26	1.51	1.30	1.40	1.85	1.35	1.44	1.53	1.94	1.77	1.92	2.50	1.91
40	1.19	1.53	1.49	1.28	1.26	1.51	1.30	1.40	1.86	1.35	1.44	1.54	1.95	1.77	1.92	2.51	1.91
41	1.19	1.54	1.50	1.28	1.27	1.52	1.30	1.41	1.86	1.36	1.45	1.54	1.95	1.78	1.93	2.51	1.91
42	1.19	1.54	1.50	1.28	1.27	1.52	1.31	1.41	1.87	1.36	1.45	1.55	1.96	1.79	1.94	2.52	1.92
43	1.20	1.55	1.51	1.29	1.28	1.53	1.32	1.42	1.88	1.37	1.46	1.56	1.97	1.80	1.95	2.54	1.93
44	1.21	1.56	1.52	1.30	1.29	1.54	1.33	1.43	1.89	1.38	1.47	1.57	1.98	1.81	1.96	2.56	1.94
45	1.22	1.57	1.53	1.31	1.30	1.55	1.34	1.44	1.90	1.39	1.48	1.58	2.00	1.82	1.98	2.57	1.96
46	1.23	1.59	1.54	1.32	1.31	1.57	1.35	1.45	1.92	1.40	1.49	1.59	2.01	1.84	1.99	2.60	1.98
47	1.24	1.60	1.56	1.33	1.32	1.58	1.36	1.47	1.94	1.41	1.51	1.61	2.03	1.85	2.01	2.62	1.99
48	1.25	1.62	1.58	1.35	1.33	1.60	1.37	1.48	1.96	1.43	1.52	1.62	2.05	1.87	2.03	2.65	2.02
49	1.27	1.64	1.59	1.36	1.35	1.61	1.39	1.50	1.98	1.45	1.54	1.64	2.08	1.89	2.05	2.68	2.04
50	1.28	1.66	1.61	1.38	1.37	1.63	1.40	1.51	2.00	1.46	1.56	1.66	2.10	1.92	2.08	2.71	2.06

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
			11.0					10.2								
11	11.52	9.74	3	10.79	12.43	9.08	5.83	9	13.15	5.59	9.40	6.07	8.88	13.39	7.50	12.47
12	5.59	4.73	5.35	5.24	6.03	4.40	2.83	4.99	6.38	2.71	4.56	2.95	4.31	6.50	3.64	6.05
13	5.13	4.34	4.91	4.80	5.53	4.04	2.59	4.58	5.85	2.49	4.18	2.70	3.95	5.96	3.34	5.55
14	4.77	4.03	4.57	4.47	5.14	3.76	2.41	4.26	5.44	2.31	3.89	2.51	3.67	5.54	3.11	5.16
15	4.49	3.80	4.30	4.20	4.84	3.54	2.27	4.01	5.12	2.18	3.66	2.37	3.46	5.22	2.92	4.86
16	4.26	3.60	4.08	3.99	4.60	3.36	2.16	3.81	4.86	2.07	3.48	2.25	3.28	4.95	2.78	4.61
17	4.08	3.45	3.91	3.82	4.40	3.21	2.06	3.64	4.66	1.98	3.33	2.15	3.14	4.74	2.66	4.41
18	3.93	3.32	3.76	3.68	4.23	3.09	1.99	3.51	4.48	1.90	3.20	2.07	3.02	4.56	2.56	4.25
19	3.80	3.22	3.64	3.56	4.10	3.00	1.93	3.40	4.34	1.85	3.10	2.01	2.93	4.42	2.48	4.12
20	3.70	3.13	3.54	3.47	3.99	2.91	1.87	3.30	4.22	1.79	3.02	1.95	2.85	4.30	2.41	4.00
21	3.61	3.06	3.46	3.39	3.90	2.85	1.83	3.23	4.13	1.75	2.95	1.90	2.78	4.20	2.35	3.91
22	3.54	3.00	3.39	3.32	3.82	2.79	1.79	3.16	4.05	1.72	2.89	1.87	2.73	4.12	2.31	3.84
23	3.49	2.95	3.34	3.27	3.76	2.75	1.77	3.12	3.98	1.69	2.85	1.84	2.69	4.06	2.27	3.77
24	3.44	2.91	3.30	3.22	3.71	2.71	1.74	3.07	3.93	1.67	2.81	1.81	2.65	4.00	2.24	3.72
25	3.28	2.78	3.14	3.07	3.54	2.59	1.66	2.93	3.75	1.59	2.68	1.73	2.53	3.82	2.14	3.55
26	3.06	2.58	2.93	2.86	3.30	2.41	1.55	2.73	3.49	1.48	2.49	1.61	2.35	3.55	1.99	3.31
27	2.88	2.43	2.75	2.69	3.10	2.27	1.46	2.57	3.28	1.40	2.35	1.52	2.22	3.34	1.87	3.11
28	2.73	2.31	2.62	2.56	2.95	2.15	1.38	2.44	3.12	1.32	2.23	1.44	2.10	3.18	1.78	2.96
29	2.61	2.21	2.50	2.45	2.82	2.06	1.32	2.33	2.98	1.27	2.13	1.38	2.01	3.04	1.70	2.83
30	2.52	2.13	2.41	2.36	2.72	1.98	1.27	2.25	2.87	1.22	2.05	1.33	1.94	2.93	1.64	2.72
31	2.45	2.08	2.35	2.30	2.65	1.93	1.24	2.19	2.80	1.19	2.00	1.29	1.89	2.85	1.60	2.66
32	2.42	2.05	2.32	2.27	2.61	1.91	1.22	2.16	2.76	1.17	1.97	1.27	1.86	2.81	1.58	2.62
33	2.39	2.02	2.29	2.24	2.58	1.88	1.21	2.13	2.73	1.16	1.95	1.26	1.84	2.78	1.56	2.59
34	2.37	2.00	2.27	2.22	2.55	1.86	1.20	2.11	2.70	1.15	1.93	1.25	1.82	2.75	1.54	2.56
35	2.35	1.99	2.25	2.20	2.53	1.85	1.19	2.10	2.68	1.14	1.92	1.24	1.81	2.73	1.53	2.54
36	2.34	1.98	2.24	2.19	2.52	1.84	1.18	2.09	2.67	1.13	1.91	1.23	1.80	2.72	1.52	2.53
37	2.33	1.97	2.23	2.18	2.51	1.84	1.18	2.08	2.66	1.13	1.90	1.23	1.79	2.71	1.52	2.52
38	2.33	1.97	2.23	2.18	2.51	1.83	1.18	2.08	2.65	1.13	1.90	1.23	1.79	2.70	1.51	2.52
39	2.32	1.97	2.23	2.18	2.51	1.83	1.18	2.08	2.65	1.13	1.90	1.23	1.79	2.70	1.51	2.52
40	2.33	1.97	2.23	2.18	2.51	1.84	1.18	2.08	2.66	1.13	1.90	1.23	1.79	2.71	1.52	2.52
41	2.33	1.97	2.24	2.19	2.52	1.84	1.18	2.08	2.67	1.13	1.90	1.23	1.80	2.71	1.52	2.53
42	2.34	1.98	2.25	2.20	2.53	1.85	1.19	2.09	2.68	1.14	1.91	1.24	1.81	2.73	1.53	2.54
43	2.36	1.99	2.26	2.21	2.54	1.86	1.19	2.10	2.69	1.14	1.92	1.24	1.82	2.74	1.54	2.55
44	2.37	2.01	2.27	2.22	2.56	1.87	1.20	2.12	2.71	1.15	1.94	1.25	1.83	2.76	1.55	2.57
45	2.39	2.02	2.29	2.24	2.58	1.88	1.21	2.13	2.73	1.16	1.95	1.26	1.84	2.78	1.56	2.59
46	2.41	2.04	2.31	2.26	2.60	1.90	1.22	2.15	2.75	1.17	1.97	1.27	1.86	2.80	1.57	2.61
47	2.43	2.06	2.33	2.28	2.63	1.92	1.23	2.17	2.78	1.18	1.99	1.28	1.88	2.83	1.59	2.63
48	2.46	2.08	2.36	2.30	2.65	1.94	1.24	2.20	2.81	1.19	2.01	1.30	1.89	2.86	1.60	2.66
49	2.49	2.10	2.38	2.33	2.68	1.96	1.26	2.22	2.84	1.21	2.03	1.31	1.92	2.89	1.62	2.69
50	2.51	2.13	2.41	2.36	2.71	1.98	1.27	2.25	2.87	1.22	2.05	1.33	1.94	2.92	1.64	2.72

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

<u>VRG</u>	<u>All Territories</u>
11	0.80
12	0.39
13	0.36
14	0.33
15	0.31
16	0.30
17	0.28
18	0.27
19	0.27
20	0.26
21	0.25
22	0.25
23	0.24
24	0.24
25	0.23
26	0.21
27	0.20
28	0.19
29	0.18
30	0.18
31	0.17
32	0.17
33	0.17
34	0.16
35	0.16
36	0.16
37	0.16
38	0.16
39	0.16
40	0.16
41	0.16
42	0.16
43	0.16
44	0.17
45	0.17
46	0.17
47	0.17
48	0.17
49	0.17
50	0.18

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	3.31	4.51	4.36	3.62	3.57	4.44	3.70	4.05	5.62	3.88	4.20	4.52	5.93	5.34	5.86	7.88	5.80
12	1.60	2.19	2.12	1.75	1.73	2.15	1.80	1.97	2.73	1.88	2.04	2.19	2.88	2.59	2.84	3.82	2.82
13	1.47	2.01	1.94	1.61	1.59	1.97	1.65	1.80	2.50	1.73	1.87	2.01	2.64	2.38	2.61	3.51	2.58
14	1.37	1.86	1.81	1.50	1.48	1.84	1.53	1.68	2.33	1.61	1.74	1.87	2.45	2.21	2.43	3.26	2.40
15	1.29	1.76	1.70	1.41	1.39	1.73	1.44	1.58	2.19	1.51	1.63	1.76	2.31	2.08	2.28	3.07	2.26
16	1.22	1.67	1.61	1.34	1.32	1.64	1.37	1.50	2.08	1.44	1.55	1.67	2.19	1.97	2.17	2.91	2.15
17	1.17	1.60	1.55	1.28	1.27	1.57	1.31	1.44	1.99	1.38	1.49	1.60	2.10	1.89	2.08	2.79	2.06
18	1.13	1.54	1.49	1.23	1.22	1.51	1.26	1.38	1.92	1.32	1.43	1.54	2.02	1.82	2.00	2.69	1.98
19	1.09	1.49	1.44	1.19	1.18	1.46	1.22	1.34	1.86	1.28	1.39	1.49	1.96	1.76	1.94	2.60	1.92
20	1.06	1.45	1.40	1.16	1.15	1.42	1.19	1.30	1.81	1.25	1.35	1.45	1.90	1.71	1.88	2.53	1.86
21	1.04	1.41	1.37	1.13	1.12	1.39	1.16	1.27	1.76	1.22	1.32	1.42	1.86	1.67	1.84	2.47	1.82
22	1.02	1.39	1.34	1.11	1.10	1.36	1.14	1.25	1.73	1.20	1.29	1.39	1.82	1.64	1.80	2.42	1.79
23	1.00	1.36	1.32	1.10	1.08	1.34	1.12	1.23	1.70	1.18	1.27	1.37	1.80	1.62	1.77	2.39	1.76
24	0.99	1.35	1.30	1.08	1.07	1.32	1.11	1.21	1.68	1.16	1.25	1.35	1.77	1.59	1.75	2.35	1.73
25	0.94	1.28	1.24	1.03	1.02	1.26	1.05	1.15	1.60	1.11	1.20	1.29	1.69	1.52	1.67	2.24	1.65
26	0.88	1.20	1.16	0.96	0.95	1.18	0.98	1.08	1.49	1.03	1.11	1.20	1.57	1.42	1.56	2.09	1.54
27	0.83	1.12	1.09	0.90	0.89	1.11	0.92	1.01	1.40	0.97	1.05	1.13	1.48	1.33	1.46	1.97	1.45
28	0.78	1.07	1.03	0.86	0.85	1.05	0.88	0.96	1.33	0.92	0.99	1.07	1.41	1.27	1.39	1.87	1.38
29	0.75	1.02	0.99	0.82	0.81	1.01	0.84	0.92	1.28	0.88	0.95	1.03	1.35	1.21	1.33	1.79	1.32
30	0.72	0.98	0.95	0.79	0.78	0.97	0.81	0.89	1.23	0.85	0.92	0.99	1.30	1.17	1.28	1.72	1.27
31	0.70	0.96	0.93	0.77	0.76	0.94	0.79	0.86	1.20	0.83	0.89	0.96	1.26	1.14	1.25	1.68	1.24
32	0.69	0.95	0.92	0.76	0.75	0.93	0.78	0.85	1.18	0.82	0.88	0.95	1.25	1.12	1.23	1.65	1.22
33	0.69	0.93	0.91	0.75	0.74	0.92	0.77	0.84	1.17	0.81	0.87	0.94	1.23	1.11	1.22	1.63	1.20
34	0.68	0.93	0.90	0.74	0.73	0.91	0.76	0.83	1.15	0.80	0.86	0.93	1.22	1.10	1.20	1.62	1.19
35	0.67	0.92	0.89	0.74	0.73	0.90	0.75	0.83	1.15	0.79	0.86	0.92	1.21	1.09	1.20	1.61	1.18
36	0.67	0.91	0.89	0.73	0.72	0.90	0.75	0.82	1.14	0.79	0.85	0.92	1.20	1.08	1.19	1.60	1.18
37	0.67	0.91	0.88	0.73	0.72	0.90	0.75	0.82	1.14	0.79	0.85	0.91	1.20	1.08	1.19	1.59	1.17
38	0.67	0.91	0.88	0.73	0.72	0.90	0.75	0.82	1.13	0.78	0.85	0.91	1.20	1.08	1.18	1.59	1.17
39	0.67	0.91	0.88	0.73	0.72	0.90	0.75	0.82	1.13	0.78	0.85	0.91	1.20	1.08	1.18	1.59	1.17
40	0.67	0.91	0.88	0.73	0.72	0.90	0.75	0.82	1.14	0.79	0.85	0.91	1.20	1.08	1.18	1.59	1.17
41	0.67	0.91	0.88	0.73	0.72	0.90	0.75	0.82	1.14	0.79	0.85	0.92	1.20	1.08	1.19	1.60	1.18
42	0.67	0.92	0.89	0.74	0.73	0.90	0.75	0.83	1.14	0.79	0.85	0.92	1.21	1.09	1.19	1.60	1.18
43	0.68	0.92	0.89	0.74	0.73	0.91	0.76	0.83	1.15	0.79	0.86	0.92	1.21	1.09	1.20	1.61	1.19
44	0.68	0.93	0.90	0.74	0.74	0.91	0.76	0.84	1.16	0.80	0.86	0.93	1.22	1.10	1.21	1.62	1.20
45	0.69	0.94	0.91	0.75	0.74	0.92	0.77	0.84	1.17	0.81	0.87	0.94	1.23	1.11	1.22	1.64	1.20
46	0.69	0.94	0.91	0.76	0.75	0.93	0.77	0.85	1.18	0.81	0.88	0.95	1.24	1.12	1.23	1.65	1.21
47	0.70	0.95	0.92	0.76	0.76	0.94	0.78	0.86	1.19	0.82	0.89	0.95	1.25	1.13	1.24	1.66	1.23
48	0.71	0.96	0.93	0.77	0.76	0.95	0.79	0.87	1.20	0.83	0.90	0.96	1.27	1.14	1.25	1.68	1.24
49	0.71	0.97	0.94	0.78	0.77	0.96	0.80	0.87	1.21	0.84	0.91	0.98	1.28	1.15	1.26	1.70	1.25
50	0.72	0.98	0.95	0.79	0.78	0.97	0.81	0.89	1.23	0.85	0.92	0.99	1.30	1.17	1.28	1.72	1.27

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	7.26	6.02	6.92	6.75	7.89	5.55	3.28	6.40	8.40	3.11	5.78	3.45	5.41	8.57	4.45	7.92
12	3.52	2.92	3.36	3.28	3.83	2.69	1.59	3.10	4.08	1.51	2.80	1.67	2.62	4.16	2.16	3.84
13	3.23	2.68	3.08	3.00	3.51	2.47	1.46	2.85	3.74	1.38	2.57	1.53	2.41	3.81	1.98	3.53
14	3.00	2.49	2.86	2.79	3.27	2.30	1.36	2.65	3.48	1.29	2.39	1.43	2.24	3.55	1.84	3.28
15	2.83	2.34	2.70	2.63	3.08	2.16	1.28	2.49	3.27	1.21	2.25	1.34	2.11	3.34	1.73	3.09
16	2.69	2.23	2.56	2.50	2.92	2.05	1.21	2.37	3.11	1.15	2.14	1.27	2.00	3.17	1.65	2.93
17	2.57	2.13	2.45	2.39	2.80	1.97	1.16	2.27	2.98	1.10	2.05	1.22	1.92	3.04	1.58	2.81
18	2.47	2.05	2.36	2.30	2.69	1.89	1.12	2.18	2.86	1.06	1.97	1.17	1.84	2.92	1.52	2.70
19	2.40	1.99	2.29	2.23	2.61	1.83	1.08	2.11	2.78	1.03	1.91	1.14	1.79	2.83	1.47	2.62
20	2.33	1.93	2.22	2.17	2.54	1.78	1.05	2.05	2.70	1.00	1.86	1.11	1.74	2.75	1.43	2.54
21	2.28	1.89	2.17	2.12	2.48	1.74	1.03	2.01	2.64	0.97	1.81	1.08	1.70	2.69	1.40	2.49
22	2.23	1.85	2.13	2.08	2.43	1.71	1.01	1.97	2.59	0.96	1.78	1.06	1.66	2.64	1.37	2.44
23	2.20	1.82	2.10	2.04	2.39	1.68	0.99	1.94	2.54	0.94	1.75	1.04	1.64	2.60	1.35	2.40
24	2.17	1.80	2.07	2.02	2.36	1.66	0.98	1.91	2.51	0.93	1.73	1.03	1.62	2.56	1.33	2.37
25	2.07	1.71	1.97	1.92	2.25	1.58	0.93	1.82	2.39	0.89	1.65	0.98	1.54	2.44	1.27	2.26
26	1.93	1.60	1.84	1.79	2.09	1.47	0.87	1.70	2.23	0.82	1.53	0.91	1.44	2.27	1.18	2.10
27	1.81	1.50	1.73	1.69	1.97	1.39	0.82	1.60	2.10	0.78	1.44	0.86	1.35	2.14	1.11	1.98
28	1.72	1.43	1.64	1.60	1.87	1.32	0.78	1.52	1.99	0.74	1.37	0.82	1.28	2.03	1.05	1.88
29	1.65	1.36	1.57	1.53	1.79	1.26	0.74	1.45	1.91	0.71	1.31	0.78	1.23	1.94	1.01	1.80
30	1.59	1.32	1.51	1.48	1.73	1.21	0.72	1.40	1.84	0.68	1.26	0.75	1.18	1.87	0.97	1.73
31	1.55	1.28	1.47	1.44	1.68	1.18	0.70	1.36	1.79	0.66	1.23	0.73	1.15	1.83	0.95	1.69
32	1.52	1.26	1.45	1.42	1.66	1.17	0.69	1.34	1.76	0.65	1.21	0.72	1.14	1.80	0.93	1.66
33	1.51	1.25	1.44	1.40	1.64	1.15	0.68	1.33	1.74	0.64	1.20	0.72	1.12	1.78	0.92	1.64
34	1.49	1.24	1.42	1.39	1.62	1.14	0.67	1.31	1.73	0.64	1.19	0.71	1.11	1.76	0.91	1.63
35	1.48	1.23	1.41	1.38	1.61	1.13	0.67	1.30	1.71	0.63	1.18	0.70	1.10	1.75	0.91	1.62
36	1.47	1.22	1.40	1.37	1.60	1.13	0.66	1.30	1.70	0.63	1.17	0.70	1.10	1.74	0.90	1.61
37	1.47	1.22	1.40	1.37	1.60	1.12	0.66	1.29	1.70	0.63	1.17	0.70	1.09	1.73	0.90	1.60
38	1.47	1.21	1.40	1.36	1.59	1.12	0.66	1.29	1.70	0.63	1.17	0.70	1.09	1.73	0.90	1.60
39	1.47	1.21	1.40	1.36	1.59	1.12	0.66	1.29	1.70	0.63	1.17	0.70	1.09	1.73	0.90	1.60
40	1.47	1.22	1.40	1.36	1.60	1.12	0.66	1.29	1.70	0.63	1.17	0.70	1.09	1.73	0.90	1.60
41	1.47	1.22	1.40	1.37	1.60	1.12	0.66	1.30	1.70	0.63	1.17	0.70	1.10	1.74	0.90	1.61
42	1.48	1.22	1.41	1.37	1.61	1.13	0.67	1.30	1.71	0.63	1.18	0.70	1.10	1.74	0.91	1.61
43	1.49	1.23	1.42	1.38	1.62	1.14	0.67	1.31	1.72	0.64	1.18	0.71	1.11	1.75	0.91	1.62
44	1.50	1.24	1.43	1.39	1.63	1.14	0.68	1.32	1.73	0.64	1.19	0.71	1.11	1.77	0.92	1.63
45	1.51	1.25	1.44	1.40	1.64	1.15	0.68	1.33	1.74	0.64	1.20	0.72	1.12	1.78	0.92	1.64
46	1.52	1.26	1.45	1.41	1.65	1.16	0.69	1.34	1.76	0.65	1.21	0.72	1.13	1.79	0.93	1.66
47	1.53	1.27	1.46	1.43	1.67	1.17	0.69	1.35	1.78	0.66	1.22	0.73	1.14	1.81	0.94	1.67
48	1.55	1.28	1.48	1.44	1.69	1.18	0.70	1.37	1.79	0.66	1.23	0.74	1.15	1.83	0.95	1.69
49	1.57	1.30	1.49	1.46	1.70	1.20	0.71	1.38	1.81	0.67	1.25	0.74	1.17	1.85	0.96	1.71
50	1.58	1.31	1.51	1.47	1.72	1.21	0.72	1.40	1.83	0.68	1.26	0.75	1.18	1.87	0.97	1.73

Stated Amount C.A.C. with M.M.& V. \$500 Deductible 15% of the Stated Amount Comprehensive Rate

Additional Charges to Reduce Deductible from \$500 - Same as Actual Cash Value Charges

For Higher Deductibles, Refer to Rule 16