Containing the Instructions and Codes Applicable to Vehicles Insured Under a Massachusetts Private Passenger Automobile Insurance Policy

Printed and Distributed by

Commonwealth Automobile Reinsurers

225 Franklin Street, Boston, MA 02110

(617) 338-4000

FAX: (617) 338-5422 TTY: (617) 880-7848

www.commauto.com

Original Effective January 1, 1981 Contains Revisions Through January 1, 2011

Massachusetts Private Passenger Automobile Statistical Plan Table of Contents

Table of Contents

			<u>Page</u>
I	Overv	view	I:1
II	Gener	al Rules	II:1
III	Gener	ral Reporting Requirements	
	A.	Pemiums	III:1
	B.	Losses	III:6
IV	Repor	rting Instructions – Premiums	
	A.	Liability	IV:1
	B.	No-Fault	IV:7
	C.	Physical Damage	IV:13
V	Repor	ting Instructions – Losses	
	A.	Liability	V:1
	B.	No-Fault	
	C.	Physical Damage	V:13
VI	Codin	g Section	VI:1
VII	Statist	tical Data Quality Program	
	A.	Statistical Data Quality Components	VII:1
	B.	Statistical Data Quality Penalties	
VIII	Recor	d Layouts	VIII:1
Apper	ndix A	Classification and Coverage Code Decision Tables	A:1
Apper		Territory Codes	
Apper		Traffic Law Violations	C:1
			D:1

Part I - Overview

A. SCOPE OF THE PLAN

The Massachusetts Private Passenger Automobile Statistical Plan is applicable to total automobile direct business written by a company on vehicles insured under a Massachusetts private passenger automobile insurance policy. The Massachusetts Private Passenger Automobile Statistical Plan should be used in conjunction with the various informational Accounting and Statistical Notices published periodically by Commonwealth Automobile Reinsurers. In order to assure that the statistical data reported to CAR is of the highest level of quality, the Massachusetts Private Passenger Automobile Statistical Plan provides companies with the necessary requirements, instructions and codes for reporting detailed statistical data for the following automobile insurance coverages to CAR:

Bodily Injury to Others

Personal Injury Protection (No-Fault)

Bodily Injury Caused by an Uninsured Automobile

Damage to Someone Else's Property

Optional Bodily Injury to Others

Medical Payments

Collision

Limited Collision

Comprehensive

Substitute Transportation

Towing and Labor

Bodily Injury Caused by an Underinsured Automobile

B. ORGANIZATION OF THE PLAN

 \star

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

Part I – Overview

Part II – General Rules

Part III – General Reporting Requirements (Premiums and Losses)

Part IV - Reporting Instructions - Premiums
Part V - Reporting Instructions - Losses

Part VI - Coding Section

Part VII - Statistical Data Quality Program

Part VIII - Record Layouts

Appendix A – Classification Code and Coverage Code Decision Tables

Appendix B - Territory Codes

Appendix C - Traffic Law Violations

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

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

Part I - Overview

B. ORGANIZATION OF THE PLAN (Continued)

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

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

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

Appendix A of this Plan contains detailed Classification and Coverage Code Decision Tables. These Decision Tables shall be used to determine whether specific data fields are required to be reported, are not required to be reported or may be optionally reported for a particular classification or coverage code.

Appendix B of this Plan contains a table of valid Territory Codes listed in both alphabetical order and numerical order. These territories correspond to the premium towns listed in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.

Appendix C of this Plan identifies all major and minor traffic violations and the chapter and section of the Massachusetts General Laws (M.G.L.) or the Code of Massachusetts Regulations (CMR) to which each violation applies.

C. <u>EFFECTIVE DATE OF THE PLAN</u>

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

D. <u>UPDATES TO THE PLAN</u>

The Massachusetts Private Passenger Automobile Statistical Plan is available for viewing or downloading from CAR's website (www.commauto.com). The current year version, as well as prior year versions of the Plan are available. CAR will publish an Accounting and Statistical Notice to notify companies of page revisions and companies will be directed to CAR's website for further information. The revised pages will be available on CAR's website and will be incorporated in the electronic version of the applicable Plan.

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

A. DATA REQUIREMENTS

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

1. Reporting Thresholds

When the Massachusetts automobile writings of a company or company group which currently does not report statistical data to CAR exceeds the established reporting thresholds for statistically reportable coverages, statistical data beginning with that policy effective year must be reported to CAR on a monthly basis. Although the determination of whether a company exceeds the established thresholds is based upon the writings of an affiliated company group, statistical data must be reported to CAR on an individual company basis. Refer to item B. of this section. The thresholds for private passenger business are \$100,000 in written premiums or \$50,000 in paid losses. Statistically reportable coverages are those coverages specified in the Massachusetts Private Passenger Automobile Statistical Plan. CAR verifies this data via the information recorded on the Exhibit of Premiums and Losses for the state of Massachusetts, which is contained on a company's Statutory Page 14 for Massachusetts for that calendar year. The reporting thresholds may be subject to yearly adjustments to reflect rate revisions and inflation. Refer to the Statistical Data Quality Components Section of the Statistical Data Quality Program for specific information on shipment reporting dates.

2. Low Volume Companies

 \star

Subject to CAR's approval, small companies may be permitted to report statistical data to CAR on a quarterly basis, rather than monthly. Companies or company groups that write less than \$500,000 in written premiums and less than \$500,000 in paid losses for statistically reportable coverages will be considered eligible for quarterly statistical reporting and are referred to as low volume companies. CAR verifies a company's volume of writings via the data recorded on the company's Statutory Page 14 for Massachusetts for the most recent calendar year. Refer to the Statistical Data Quality Program Section of this Plan for additional information and potential reporting penalties applicable to low volume companies.

A. <u>DATA REQUIREMENTS (Continued)</u>

3. Companies in a Run-Off Position

Companies in a run-off position that ceded private passenger automobile insurance policies to CAR with effective dates prior to April 1, 2009 must continue to statistically report run-off premium, paid loss and outstanding loss activity on all ceded policies. Statistical data must continue to be reported until all ceded premium has been reported and all ceded losses have been paid or closed without payment or CAR has closed-out the ceded premium and/or loss statistical reporting for the particular policy effective year. Additionally, companies in a run-off position because they have stopped writing private passenger automobile insurance policies must continue to report statistical data for voluntarily written business, but only until their total written premiums and paid losses (both voluntary and ceded combined) are less than the reporting thresholds noted above.

4. Reconciliation of Massachusetts Annual Statement Data

In addition to the above statistical reporting requirements, all companies that are licensed to write automobile insurance in the state of Massachusetts are required to submit an electronic copy of their NAIC Annual Statement filings to CAR on a yearly basis. Additionally, for each of the other three calendar quarters, companies must submit Statutory Page 14 for Massachusetts data via CAR's on-line Annual Statement Reconciliation System. This data must be submitted to CAR even if the company has no actual writings. On a quarterly basis, CAR reconciles a company's Statutory Page 14 for Massachusetts data to the data that the company has statistically reported to CAR. The reconciliation process is performed to verify the accuracy and completeness of the database utilized for statistical and residual market purposes. Specific information regarding the submission of Statutory Page 14 for Massachusetts data is detailed in a quarterly Accounting and Statistical Notice distributed by CAR and in the Technical User Guide for CAR's Online Annual Statement Reconciliation System. Refer to the Statistical Data Quality Program Section of this Plan for additional information and potential reporting penalties associated with the Massachusetts Annual Statement process.

B. <u>REPORTING METHOD</u>

 \star

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

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

The following general instructions apply:

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

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

 \star

B. REPORTING METHOD (Continued)

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

★ C. POLICIES CEDED TO COMMONWEALTH AUTOMOBILE REINSURERS PRIOR TO APRIL 1, 2009

- All premiums and losses that are associated with policies ceded to Commonwealth Automobile Reinsurers with effective dates prior to April 1, 2009 must be reported to CAR. Premium and loss transactions for such ceded risks must be identified by the appropriate CAR Identification Code specified in the Coding Section of this Plan.
- CAR's Plan of Operation and rules 1 through 20 of CAR's Rules of Operation required that the premium on ceded policies be reported at the full policy premium for cedable or total limits, regardless of the date of cession. Although only cedable limits or coverages will be covered by CAR, the full policy premium must be reported. When the total limits premium for a policy exceeds CAR's cedable limits, the portion that exceeds the cedable limit must be reported as a separate record utilizing the special non-cedable Classification Code. This code is identified in the Coding Section of this Plan as a Special Rating and Adjustment classification. The record also must be reported with the appropriate voluntary business CAR Identification Code. The premium amount reported would be the portion of premium that exceeds the cedable limit.
- Risks that were initially written as voluntary business, but then ceded to CAR during the policy's term must be treated as ceded business for the entire policy period. That is, offset and reenter adjustment entries must be reported to remove the record as voluntary business and replace it as ceded business, using the appropriate ceded CAR Identification Code and the total premium and exposure for the risk.

D. ADJUSTMENTS (ENDORSEMENTS)

★

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

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

★ E. REINSURANCE – OTHER THAN POLICIES PREVIOUSLY CEDED TO CAR

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

Part III - General Reporting Requirements

Section A – Premiums

1. REPORTING OF PREMIUMS

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

Companies have the option to report combined bodily injury liability premiums apart from property damage liability premiums, on separate statistical records. Similarly, other than collision and collision premiums may be reported on separate statistical records if desired. Note that if Original Equipment Manufacturer (OEM) coverage exists on a policy, but is only applicable to one of the written physical damage coverages, separate collision and other than collision physical damage statistical records must be reported.

Premium relating to a new or additional company specific coverage must be reported on a separate statistical record using Classification Code 998000, Type of Risk 9, and if applicable to physical damage, All Other Coverage Code 089 or 099.

If a limit of liability or physical damage deductible for which a statistical code is not currently available is offered, the premium record must be reported with the applicable classification and record reporting requirements and with the established all other limit or deductible codes.

★ 2. <u>REPORTING OF MERIT RATING PREMIUMS</u>

The portion of bodily injury liability, property damage liability, PIP (no-fault) and physical damage collision premium attributable to merit rating surcharge or credit amounts must be combined with the policy base premium and reported on the applicable liability, PIP (no-fault) or physical damage premium record format.

The fifth and sixth positions of the reported Classification Code must indicate the merit rating status of the operator used to rate the vehicle. Merit rating status is defined as the number of points or incident free years recognized by the merit rating plan described in Rule 56 of the Commonwealth Automobile Reinsurers' Massachusetts Private Passenger Automobile Insurance Manual. Refer to the Coding Section and Appendix C of this Plan for specific instructions.

If the merit rating status of an operator changes during the policy term, follow the endorsement instructions described in this section. If a cancellation occurs, follow the cancellation instructions described in this section.

Part III - General Reporting Requirements

Section A - Premiums

★ 3. REPORTING OF EXPOSURE

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

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

★ 4. CHANGES IN COVERAGE BY ENDORSEMENT

a. Endorsements Effective as of the Policy Effective Date

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

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

Record	Tx- Type	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Exp	BI Premium	PD Premium	Class Code
Original	11	06-00	06-00	06-01	+12	\$527	\$190	110199
Offset	12	06-00	06-00	06-01	-12	-\$527	-\$190	110199
Reenter	12	06-00	06-00	06-01	+12	\$812	\$289	126900

b. Endorsements Effective Subsequent to the Policy Effective Date

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

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

Record	Tx- Type	Pol-Eff- Date	Tx-Eff- Date	Pol-Exp- Date	Ехр	OTC Prem	Coll Prem	VIN
Original	11	06-00	06-00	06-01	+12	\$72	\$250	JT3FJ62G1L1121580
Offset	12	06-00	12-00	06-01	- 6	-\$36	-\$125	JT3FJ62G1L1121580
Reenter	12	06-00	12-00	06-01	+6	\$88	\$494	1J4HI52K6TH450117

Part III - General Reporting Requirements

Section A – Premiums

4. CHANGES IN COVERAGE BY ENDORSEMENT (continued)

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

5. CANCELLATION OF PREMIUMS

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

a. Flat Cancellation

 \bigstar

 \star

For a flat cancellation, the entry must be identical to the original entry except:

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

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

b. Pro Rata Cancellation

For a pro rata cancellation, the entry must be identical to the original entry except:

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

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

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

Part III - General Reporting Requirements

Section A – Premiums

5. CANCELLATION OF PREMIUMS (Continued)

c. Short Rate Cancellation

 \star

For a short rate cancellation, the entry must be identical to the original entry except:



- . The unearned portion of the premium, calculated on the basis of the applicable short rate table and the exposure shall be shown as a credit
- ii. The Transaction Effective Date shall be the effective date of the cancellation
- iii. The Accounting Date shall be the month and year that the company booked the cancellation
- iv. The Transaction Type Code shall be 13

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

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

6. EXTRA-RISK RATING

Physical damage premium records should be coded to identify the appropriate extra-risk category, and if applicable, should reflect the extra-risk rate charged to the insured. Note that extra-risk rating does not apply to limited collision coverage. Refer to the Coding Section of this Plan for specific instructions.

In cases where separate other than collision and collision records are reported for the same vehicle, and a rate adjustment is made to one coverage and not the other, the extra-risk coding must be provided for both records. For example, when coding records with an extra-risk category that only provides for a rate adjustment to the other than collision but not the collision portion of the insured's physical damage premium, each record should contain the applicable extra-risk rate code.

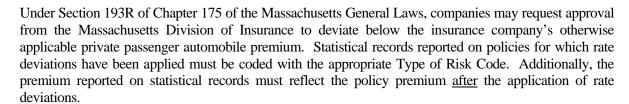
In this example, the collision record reported must contain extra-risk coding, even though the rate adjustment to the collision premium is zero. The extra-risk rate for two or more fire claims or two or more total theft claims only affects the other than collision coverage as shown below:

Record	Other Than Collision Extra-Risk Rate Code	Collision Extra-Risk Rate Code	Rate Adjustment to Base Premium	
Other Than Collision	4	0	1.5	
Collision	0	8	None	

Part III - General Reporting Requirements

Section A – Premiums

7. RATE DEVIATIONS



Refer to the Coding Section for applicable codes and examples.

8. MULTIPLE YEAR POLICIES AND INSTALLMENT POLICIES

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

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

9. RULES FOR EXTENDING A POLICY

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

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

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

Part III - General Reporting Requirements

Section B – Losses

1. REPORTING OF LOSSES

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

Losses relating to a company specific coverage that is provided either at an additional premium charge or at no additional premium charge must be statistically reported using Classification Code 998000, All Other Coverage Code 089 or 099, Type of Loss 09 and Type of Risk 9.

Allocated loss adjustment expenses must be submitted for all liability and PIP (no-fault) losses. For physical damage losses, allocated loss adjustment expenses are required only for losses paid under policies ceded to or assigned through the residual market. However, allocated loss adjustment expenses for voluntary paid physical damage losses may be optionally reported.

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

a. Claim Definition

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

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



Part III - General Reporting Requirements

Section B – Losses

3. ACCIDENT REPORTING

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

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

Sample Loss Scenario:

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

	Cubling	Type of	0	Loss	Claim Identification Number			
Claimant	Subline Code	Loss Code	Coverage Code	Amount	Method 1	Method 2	Method 3	
	621	05		\$1,500	ABC010	ABC010	ABC010	
_	625	24		\$7,500	ABC010	ABC010	ABC010	
(Driver A)	625	34		\$500	ABC010	ABC010	ABC010	
(Driver A)	628	11	016	\$1,600	ABC010	ABC019	ABC019	
	628	09	083	\$900	ABC010	ABC019	ABC018	
2	621	03		\$3,500	ABC020	ABC020	ABC020	
(Driver P)	621	01		\$10,000	ABC020	ABC020	ABC020	
(Driver B)	621	11		\$9,160	ABC020	ABC020	ABC020	

Part III - General Reporting Requirements

Section B - Losses

4. REPORTING OF ALLOCATED/UNALLOCATED LOSS ADJUSTMENT EXPENSES

a. Allocated Loss Adjustment Expenses (ALAE)

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

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

i. Transaction Type Code 27

The following are allowable legal allocated loss adjustment expenses:

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

ii. Transaction Type Code 29

The following are allowable medical allocated loss adjustment expenses:

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

Part III - General Reporting Requirements

Section B - Losses

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

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

iii. Transaction Type Code 24

The following are allowable all other allocated loss adjustment expenses:

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

b. Unallocated Loss Adjustment Expenses

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

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

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

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

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

Part III - General Reporting Requirements

Section B – Losses

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

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

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

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

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

7. SUBROGATION RECOVERIES/EXPENSES (OTHER THAN THOSE RESULTING FROM INTER/INTRACOMPANY REIMBURSEMENTS

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

a. Indemnity Recoveries

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

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





Part III - General Reporting Requirements

Section B – Losses

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

a. Indemnity Recoveries (Continued)

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

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

b. Allocated Loss Adjustment Expense Recoveries

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

8. SALVAGE RECOVERIES/EXPENSES

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

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

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

9. AMOUNT OF PAID LOSS AND EXPENSE

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

*

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

Last Revision Date: 01/01/2010 **Page: III:11** Print Date: 08/20/2009

Part III - General Reporting Requirements

Section B – Losses

★ 10. PARTIAL/TOTAL LOSS FOR PAID PROPERTY LOSSES

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

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

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

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

11. OUTSTANDING LOSSES (EXCLUDING PHYSICAL DAMAGE)

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

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

12. GLASS LOSSES

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

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

13. EXTRA-RISK RATING

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

Part III - General Reporting Requirements

Section B - Losses

★ 14. MERIT RATING PLAN

The merit rating status of the operator used to rate the vehicle must be reported in the fifth and sixth positions of the Classification Code. The merit rating status reported on the loss record must match the merit rating status as reported on the corresponding premium records.

Part IV - Reporting Instructions - Premiums

Section A – Liability

1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)

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

2. TRANSACTION TYPE CODE (Positions 4-5)

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

3. ACCOUNTING DATE (Positions 6-7)

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

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

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

4. POLICY EFFECTIVE DATE (Positions 8-10)

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

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

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

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

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

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

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

Part IV - Reporting Instructions - Premiums

Section A – Liability

6. POLICY EXPIRATION DATE (Positions 14-16)

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

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

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

7. STATE CODE (Positions 17-18)

Report State Code 20.

★ 8. TERRITORY CODE (Positions 19-21)

Report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town).

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

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

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

10. TYPE OF RISK CODE (Position 23)

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

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

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

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 621.

Part IV - Reporting Instructions - Premiums

Section A – Liability

13. CLASSIFICATION CODE (Positions 30-35)

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

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

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

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

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

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

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

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

18. <u>BODILY INJURY CAUSED BY AN UNINSURED AUTO LIMITS CODE</u> (Positions 43-44)

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

19. <u>BODILY INJURY CAUSED BY AN UNDERINSURED AUTO LIMITS CODE</u> (Positions 45-46)

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

20. Reserved for Future Use (Position 47)

Report space or zero.

★ 21. ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code rounded to the nearest hundred miles.

Refer to the Coding Section for examples.

Part IV - Reporting Instructions - Premiums

Section A – Liability

22. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

23. Reserved for Future Use (Positions 53-55)

Report spaces or zeros.

24. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

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

25. <u>DISCOUNT CODE (Position 57)</u>

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

26. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)

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

★ 27. LOW FREQUENCY DISCOUNT CODE (Position 59)

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

★ 28. Reserved for Future Use (Position 60)

Report spaces or zeros.

29. PRODUCER CODE (Positions 61-66)

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

Refer to the Coding Section for examples.

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

Report spaces or zeros.

Last Revision Date: 04/01/2010 **Page: IV:4** Print Date: 02/23/2010

Part IV - Reporting Instructions - Premiums

Section A – Liability

31. ZIP CODE (Positions 72-80)

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

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

Refer to the Coding Section for examples.

32. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

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

★ 33. Reserved for Future Use (Positions 88-90)

Report spaces or zeros.

34. Reserved for Future Use (Positions 91-95)

Report spaces or zeros.

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

Report the combined premium for Bodily Injury, Optional Bodily Injury, Medical Payments, Bodily Injury Caused by an Uninsured Auto and Bodily Injury Caused by an Underinsured Auto rounded to the nearest whole dollar.

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

Last Revision Date: 01/01/2010 **Page: IV:5** Print Date: 02/23/2010

Part IV - Reporting Instructions - Premiums

Section A – Liability

36. PROPERTY DAMAGE PREMIUM AMOUNT (Positions 104-111)

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

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

37. Reserved for Future Use (Positions 112-114)

Report spaces or zeros.

38. POLICY IDENTIFICATION NUMBER (Positions 115-130)

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

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

Refer to the Coding Section for examples.

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

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

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

Refer to the Coding Section for examples.

40. COMPANY USE (Positions 148-150)

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

Part IV - Reporting Instructions - Premiums

Section B – No-Fault

1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)

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

2. TRANSACTION TYPE CODE (Positions 4-5)

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

3. ACCOUNTING DATE (Positions 6-7)

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

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

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

4. POLICY EFFECTIVE DATE (Positions 8-10)

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

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

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

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

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

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

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

Part IV - Reporting Instructions - Premiums

Section B - No-Fault

6. POLICY EXPIRATION DATE (Positions 14-16)

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

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

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

7. STATE CODE (Positions 17-18)

Report State Code 20.

★ 8. TERRITORY CODE (Positions 19-21)

Report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town).

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

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

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

10. TYPE OF RISK CODE (Position 23)

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

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

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

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 625.

Last Revision Date: 01/01/2010 **Page: IV:8** Print Date: 08/20/2009

Part IV - Reporting Instructions - Premiums

Section B – No-Fault

13. CLASSIFICATION CODE (Positions 30-35)

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

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. PIP COVERAGE CODE (Position 37)

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

16. PIP DEDUCTIBLE CODE (Positions 38-39)

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

17. Reserved for Future Use (Positions 40-47)

Report space or zeros.

★ 18. ANNUAL MILEAGE CODE (Positions 48-50)

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

19. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

20. Reserved for Future Use (Positions 53-55)

Report spaces or zero.

Part IV - Reporting Instructions - Premiums

Section B – No-Fault

21. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

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

22. DISCOUNT CODE (Position 57)

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

★ 23. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)

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

★ 24. LOW FREQUENCY DISCOUNT CODE (Position 59)

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

★ 25. Reserved for Future Use (Position 60)

Report spaces or zeros.

26. PRODUCER CODE (Positions 61-66)

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

Refer to the Coding Section for examples.

27. RESERVED FOR FUTURE USE (Positions 67-71)

Report spaces or zeros.

28. **ZIP CODE (Positions 72-80)**

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

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

Refer to the Coding Section for examples.

Part IV - Reporting Instructions - Premiums

Section B - No-Fault

29. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

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

★ 30. Reserved for Future Use (Positions 88-90)

Report spaces or zeros.

31. Reserved for Future Use (Positions 91-95)

Report spaces or zeros.

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

Report the PIP premium rounded to the nearest whole dollar.

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

33. Reserved for Future Use (Positions 104-114)

Report spaces or zeros.

34. POLICY IDENTIFICATION NUMBER (Positions 115-130)

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

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

Refer to the Coding Section for examples.

Part IV - Reporting Instructions - Premiums

Section B – No-Fault

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

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

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

Refer to the Coding Section for examples.

36. COMPANY USE (Positions 148-150)

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

Part IV - Reporting Instructions - Premiums

Section C – Physical Damage

1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)

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

2. TRANSACTION TYPE CODE (Positions 4-5)

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

3. ACCOUNTING DATE (Positions 6-7)

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

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

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

4. POLICY EFFECTIVE DATE (Positions 8-10)

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

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

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

5. TRANSACTION EFFECTIVE DATE (Positions 11-13)

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

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

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

Part IV - Reporting Instructions - Premiums

<u>Section C – Physical Damage</u>

6. POLICY EXPIRATION DATE (Positions 14-16)

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

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

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

7. STATE CODE (Positions 17-18)

Report State Code 20.

★ 8. TERRITORY CODE (Positions 19-21)

Report the three (3) digit numeric code for the town that is the location of principal garaging (i.e. rating town).

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

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

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

10. TYPE OF RISK CODE (Position 23)

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

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

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

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 628.

Part IV - Reporting Instructions - Premiums

<u>Section C – Physical Damage</u>

13. CLASSIFICATION CODE (Positions 30-35)

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

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

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

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

16. COLLISION COVERAGE CODE (Positions 40-42)

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

★ 17. Reserved for Future Use (Positions 43-47)

Report spaces or zeros.

\bigstar

18. ANNUAL MILEAGE CODE (Positions 48-50)

Report the three (3) digit numeric code rounded to the nearest hundred miles.

Refer to the Coding Section for examples.

19. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code corresponding to the third and fourth positions of the model year of the vehicle.

Refer to the Coding Section for examples.

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

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

Part IV - Reporting Instructions - Premiums

<u>Section C – Physical Damage</u>

21. Reserved for Future Use (Positions 54-55)

Report spaces or zeros.

22. OEM COVERAGE CODE (Position 56)

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

★ 23. <u>DISCOUNT CODE (Position 57)</u>

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

24. VALUE CODE (Positions 58-60)

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

25. PRODUCER CODE (Positions 61-66)

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

Refer to the Coding Section for examples.

26. HIGH-THEFT VEHICLE CODE (Position 67)

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

27. Reserved for Future Use (Position 68)

Report space or zero.

28. EXTRA-RISK RATING CODE – OTHER THAN COLLISION (Position 69)

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

29. Reserved for Future Use (Position 70)

Report space or zero.

Part IV - Reporting Instructions - Premiums

Section C – Physical Damage

30. EXTRA-RISK RATING CODE - COLLISION (Position 71)

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

31. ZIP CODE (Positions 72-80)

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

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

Refer to the Coding Section for examples.

32. EXPOSURE (Positions 81-87)

Report exposure as the number of car months. A car month is equivalent to one car insured for one month. Refer to the Exposure table in the Coding Section.

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

★ 33. Reserved for Future Use (Positions 88-90)

Report spaces or zeros.

34. Reserved for Future Use (Positions 91-95)

Report spaces or zeros.

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

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

Part IV - Reporting Instructions - Premiums

Section C – Physical Damage

36. COLLISION PREMIUM AMOUNT (Positions 104-111)

Report the collision premium rounded to the nearest whole dollar.

37. Reserved for Future Use (Positions 112-114)

Report spaces or zeros.

38. POLICY IDENTIFICATION NUMBER (Positions 115-130)

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

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

Refer to the Coding Section for examples.

39. VEHICLE IDENTIFICATION NUMBER (Positions 131-147)

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

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

Refer to the Coding Section for examples.

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

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

Part V - Reporting Instructions - Losses

Section A – Liability

1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)

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

2. TRANSACTION TYPE CODE (Positions 4-5)

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

3. ACCOUNTING DATE (Positions 6-7)

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

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

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

4. POLICY EFFECTIVE DATE (Positions 8-10)

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

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

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

5. ACCIDENT DATE (Positions 11-15)

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

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

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

Part V - Reporting Instructions - Losses

Section A – Liability

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

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

6. Reserved for Future Use (Position 16)

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

★ 8. TERRITORY CODE (Positions 19-21)

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

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

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

10. TYPE OF RISK CODE (Position 23)

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

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

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

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 621.

Part V - Reporting Instructions - Losses

Section A – Liability

13. CLASSIFICATION CODE (Positions 30-35)

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

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. LIABILITY LIMITS CODE (Positions 37-38)

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

Refer to the Coding Section for applicable codes.

16. Reserved for Future Use (Position 39)

Report space or zero.

★ 17. Reserved for Future Use (Positions 40-42)

Report spaces or zeros.

18. Reserved for Future Use (Positions 43-47)

Report spaces or zeros.

19. ANNUAL MILEAGE CODE (Positions 48-50)

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

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section A – Liability

20. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

21. Reserved for Future Use (Positions 53-54)

Report spaces or zeros.

22. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

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

23. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

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

24. **DISCOUNT CODE (Position 57)**

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

★ 25. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)

Report the one (1) digit numeric code. The Continuous Coverage Discount Code on the loss record must match the Continuous Coverage Discount Code from the policy's corresponding premium record.

★ 26. LOW FREQUENCY DISCOUNT CODE (Position 59)

Report the one (1) digit numeric code. The Low Frequency Discount Code on the loss record must match the Low Frequency Discount Code from the policy's corresponding premium record.

★ 27. Reserved for Future Use (Position 60)

Report spaces or zeros.

Part V - Reporting Instructions - Losses

Section A – Liability

28. PRODUCER CODE (Positions 61-66)

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

Refer to the Coding Section for examples.

29. Reserved for Future Use (Positions 67-71)

Report spaces or zeros.

30. ZIP CODE (Positions 72-80)

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

Refer to the Coding Section for examples.

31. RESERVED FOR FUTURE USE (Position 81)

Report space or zero.

32. REPORTING DATE (Positions 82-84)

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

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

33. Reserved for Future Use (Positions 85-86)

Report spaces or zeros.

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

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

★ 35. Reserved for Future Use (Positions 89-90)

Report spaces or zeros.

Part V - Reporting Instructions - Losses

Section A – Liability

36. LOSS AMOUNT (Positions 91-98)

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

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

37. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

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

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

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

Refer to the Coding Section for examples.

38. POLICY IDENTIFICATION NUMBER (Positions 115-130)

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

Refer to the Coding Section for examples.

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

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

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

Refer to the Coding Section for examples.

40. COMPANY USE (Positions 148-150)

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

Part V - Reporting Instructions - Losses

Section B - No Fault

1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)

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

2. TRANSACTION TYPE CODE (Positions 4-5)

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

3. ACCOUNTING DATE (Positions 6-7)

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

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

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

4. POLICY EFFECTIVE DATE (Positions 8-10)

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

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

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

5. ACCIDENT DATE (Positions 11-15)

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

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

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

Part V - Reporting Instructions - Losses

Section B – No Fault

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

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

6. Reserved for Future Use (Position 16)

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

★ 8. TERRITORY CODE (Positions 19-21)

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

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

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

10. TYPE OF RISK CODE (Position 23)

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

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

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

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 625.

Part V - Reporting Instructions - Losses

Section B – No Fault

13. CLASSIFICATION CODE (Positions 30-35)

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

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. PIP COVERAGE CODE (Position 37)

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

16. PIP DEDUCTIBLE CODE (Positions 38-39)

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

★ 17. Reserved for Future Use (Positions 40-42)

Report spaces or zeros.

18. Reserved for Future Use (Positions 43-47)

Report spaces or zeros.

19. ANNUAL MILEAGE CODE (Positions 48-50)

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

Refer to the Coding Section for examples.

20. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

Part V - Reporting Instructions - Losses

Section B – No Fault

21. TYPE OF CLAIMANT CODE (Position 53)

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

22. Reserved for Future Use (Positions 54-55)

Report spaces or zeros.

23. PASSIVE RESTRAINT DEVICE DISCOUNT CODE (Position 56)

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

24. <u>DISCOUNT CODE (Position 57)</u>

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

★ 25. CONTINUOUS COVERAGE DISCOUNT CODE (Position 58)

Report the one (1) digit numeric code. The Continuous Coverage Discount Code on the loss record must match the Continuous Coverage Discount Code from the vehicle's corresponding premium record.

★ 26. LOW FREQUENCY DISCOUNT CODE (Position 59)

Report the one (1) digit numeric code. The Low Frequency Discount Code on the loss record must match the Low Frequency Discount Code from the vehicle's corresponding premium record.

★ 27. Reserved for Future Use (Position 60)

Report spaces or zeros.

28. PRODUCER CODE (Positions 61-66)

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

Refer to the Coding Section for examples.

29. Reserved for Future Use (Positions 67-71)

Report spaces or zeros.

Part V - Reporting Instructions - Losses

Section B – No Fault

30. ZIP CODE (Positions 72-80)

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

Refer to the Coding Section for examples.

31. Reserved for Future Use (Positions 81-86)

Report spaces or zeros.

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

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

★ 33. Reserved for Future Use (Positions 89-90)

Report spaces or zeros.

34. LOSS AMOUNT (Positions 91-98)

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

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

35. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

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

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

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

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section B – No Fault

36. POLICY IDENTIFICATION NUMBER (Positions 115-130)

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

Refer to the Coding Section for examples.

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

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

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

Refer to the Coding Section for examples.

38. COMPANY USE (Positions 148-150)

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

Part V - Reporting Instructions - Losses

Section C – Physical Damage

1. COMPANY OR GROUP NUMBER CODE (Positions 1-3)

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

2. TRANSACTION TYPE CODE (Positions 4-5)

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

3. ACCOUNTING DATE (Positions 6-7)

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

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

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

4. POLICY EFFECTIVE DATE (Positions 8-10)

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

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

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

5. ACCIDENT DATE (Positions 11-15)

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

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

Accident day requires a two (2) digit code in positions12-13.

Part V - Reporting Instructions - Losses

Section C – Physical Damage

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

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

6. Reserved for Future Use (Position 16)

Report space or zero.

7. STATE CODE (Positions 17-18)

Report State Code 20.

★ 8. TERRITORY CODE (Positions 19-21)

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

Refer to Appendix B for applicable codes.

9. CAR IDENTIFICATION CODE (Position 22)

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

10. TYPE OF RISK CODE (Position 23)

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

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

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

12. SUBLINE CODE (Positions 27-29)

Report Subline Code 628.

Part V - Reporting Instructions - Losses

<u>Section C – Physical Damage</u>

13. CLASSIFICATION CODE (Positions 30-35)

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

14. MODEL YEAR CENTURY CODE (Position 36)

Report the one (1) digit numeric code.

15. COVERAGE CODE (Positions 37-39)

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

★ 16. Reserved for Future Use (Positions 40-47)

Report spaces or zeros.

*

17. ANNUAL MILEAGE CODE (Positions 48-50)

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

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section C – Physical Damage

18. MODEL YEAR CODE (Positions 51-52)

Report the two (2) digit numeric code. The Model Year Code on the loss record must match the Model Year Code in effect as of the date of loss, from the vehicle's corresponding premium record.

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

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

20. Reserved for Future Use (Position 54)

Report space or zero.

21. PARTIAL/TOTAL LOSS INDICATOR (Position 55)

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

22. OEM COVERAGE CODE (Position 56)

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

★ 23. DISCOUNT CODE (Position 57)

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

24. VALUE CODE (Positions 58-60)

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

Part V - Reporting Instructions - Losses

<u>Section C – Physical Damage</u>

25. PRODUCER CODE (Positions 61-66)

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

Refer to the Coding Section for examples.

26. <u>HIGH-THEFT VEHICLE CODE (Position 67)</u>

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

27. Reserved for Future Use (Position 68)

Report space or zero.

28. EXTRA-RISK RATING CODE – OTHER THAN COLLISION (Position 69)

Report the one (1) digit numeric code. The Extra-Risk Rating Code - Other Than Collision on the loss record must match the Extra-Risk Rating Code - Other Than Collision as of the date of loss, from the vehicle's corresponding premium record. Refer to the Coding Section for applicable codes.

29. Reserved for Future Use (Position 70)

Report space or zero.

30. EXTRA-RISK RATING CODE - COLLISION (Position 71)

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

31. **ZIP CODE (Positions 72-80)**

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

Refer to the Coding Section for examples.

32. Reserved for Future Use (Positions 81-84)

Report spaces or zeros.

Last Revision Date: 01/01/2000 Page: V:17 Print Date: 06/24/2010

Part V - Reporting Instructions - Losses

Section C – Physical Damage

33. CATASTROPHE CODE (Positions 85-86)

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

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

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

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

★ 35. Reserved for Future Use (Positions 89-90)

Report spaces or zeros.

36. LOSS AMOUNT (Positions 91-98)

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

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

37. CLAIM IDENTIFICATION NUMBER (Positions 99-114)

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

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

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

Refer to the Coding Section for examples.

Part V - Reporting Instructions - Losses

Section C – Physical Damage

38. POLICY IDENTIFICATION NUMBER (Positions 115-130)

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

Refer to the Coding Section for examples.

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

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

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

Refer to the Coding Section for examples.

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

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

Massachusetts Private Passenger Automobile Statistical Plan Part VI - Coding Section

Liability, No-Fault, and Physical Damage

This section applies to all records

Last Revision Date: 01/01/2000 Print Date: 01/01/2000

Part VI - Coding Section

TRANSACTION TYPE CODE

Premium Codes			
Transaction Type	Liability Annual Statement Line of Business 19.2	No-Fault Annual Statement Line of Business 19.1	Physical Damage Annual Statement Line of Business 21.1
New or Renewal	11	11	11
Endorsement or Audit or Policy Extension	12	12	12
Cancellation of Policy Pro Rata or Short Rate	13	13	13
Reinstatement	14	14	14
Cancelled Flat	15	15	15

Loss Codes			
Transaction Type	Liability Annual Statement Line of Business 19.2	No-Fault Annual Statement Line of Business 19.1	Physical Damage Annual Statement Line of Business 21.1
Outstanding Loss	21	21	
Outstanding Allocated Loss Adjustment Expense	22	22	
Paid Loss	23	23	23
Paid All Other Allocated Loss Adjustment Expense	24	24	24 *
Salvage Recoveries	25		25
Subrogation Recoveries	26	26	26
Paid Legal Allocated Loss Adjustment Expense	27	27	27 *
Paid Medical Allocated Loss Adjustment Expense	29	29	

 \star

 \star

* Reporting paid allocated loss adjustment expenses on physical damage losses is required for policies ceded to or assigned through the residual market, and optional for voluntary business.

Part VI - Coding Section

STATE CODE

State	Code
Massachusetts	20

Part VI - Coding Section

CAR IDENTIFICATION CODE

*	Description (Policy Effective Dates January 1, 1997 through March 31, 2008)	Code
	Direct business written from Voluntary Agents or by the company (Representative Producers) that is not ceded to CAR	0
	Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is not ceded to CAR	1
	Direct business from Voluntary Agents or by the company (Representative Producers) that is ceded to CAR	4
	Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is ceded to CAR	5

Part VI - Coding Section

CAR IDENTIFICATION CODE (continued)

 \star

Description (Policy Effective Dates April 1, 2008 through March 31, 2009)	Code
Direct business written from Voluntary Agents or by the company (Representative Producers) that is not ceded to CAR and is not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	0
Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is not ceded to CAR and not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	1
Direct business written from Voluntary Agents or by the company (Representative Producers) that is ceded to CAR and is not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	4
Direct business written from Exclusive Representative Producers (No Voluntary Contract) that is ceded to CAR and is not eligible for placement in the Massachusetts Automobile Insurance Plan (MAIP)	5
Direct business written voluntarily that is not assigned through the Massachusetts Automobile Insurance Plan (MAIP) and that would otherwise be eligible for placement through the Massachusetts Automobile Insurance Plan (MAIP)	8*
Direct business written that is assigned to the company through the Massachusetts Automobile Insurance Plan (MAIP) that is eligible for placement through the MAIP	9*

^{*} To be eligible for placement through the MAIP, the business:

- Must be defined as New Business as specified in Rule 22 of the MAIP Rules of Operation, or
- Must have ten or more Safe Driver Insurance Plan points, as specified in Rule 21 of the MAIP Rules of Operation, and
- Must not be defined as a Clean-in-Three risk as specified in Rule 22 of the MAIP Rules of Operation, with renewal dates during the period April 1, 2008 through March 31, 2009, subject to the exceptions specified in Rule 21 of the MAIP Rules of Operation

Part VI - Coding Section

CAR IDENTIFICATION CODE (continued)

Description (Policy Effective Dates April 1, 2009 and subsequent)	Code
Direct business written voluntarily that meets both the Clean-in-Three definition in Rule 22 of the CAR Rules of Operation and the voluntary market share exclusion criteria specified in Rule 29 of the CAR Rules of Operation	1
Direct business written voluntarily that does not meet the description of Code 1 above	8
Direct business written that is assigned through the Massachusetts Automobile Insurance Plan (MAIP)	9

 \star

 \star

Part VI - Coding Section

★ TYPE OF RISK CODE

Description	Code
Regular Business (Massachusetts Motor Vehicle Policies and Risks not coded below)	1
Business Written at a Rate Discount Approved under Section 193R of Chapter 175 of the General Laws	3
Business Written at a Rate Discount (Risks Not Subject to the Compulsory Law) • Approved under Section 193R of Chapter 175 of the General Laws	5
Business Not Subject to the Compulsory Law and Not Written at a Rate Discount	7
Company Specific Coverage • Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08	9

Part VI - Coding Section

★ ANNUAL STATEMENT LINE OF BUSINESS CODE

Description	Line of Business	Code
Private Passenger Auto No-Fault (Personal Injury Protection)	19.1	191
Other Private Passenger Auto Liability	19.2	192
Private Passenger Auto Physical Damage	21.1	211

Part VI - Coding Section

SUBLINE CODE

Subline	Code
Liability	621
PIP (No-Fault)	625
Physical Damage	628

Part VI - Coding Section

CLASSIFICATION CODE

STATISTICAL CLASS CODE ASSIGNMENT

• Statistical Class Code assignments shall be based on the characteristics of the individual used to rate the vehicle.

 \star

• Below is a list of Statistical Class Code definitions that follow on the subsequent pages:

Private Passenger Miscellaneous Rated as Private Passenger Private Passenger Motorcycles Non-Owned Automobiles Special Rating and Adjustment

Part VI - Coding Section

CLASSIFICATION CODE

PRIVATE PASSENGER DEFINITION

	Description: First Three Positions (Statistical Class)	Code
*	For single vehicle policies, there is no operator of the automobile under 25 years of age residing in the same household as the applicant or employed as a chauffeur for the automobile or who customarily operates the automobile and the automobile is not customarily used in the occupation, profession or business of the insured.	110
	Qualifies for Class 110 except the operator of the automobile is age 65 through 74.	115
	Qualifies for Class 110 except the operator of the automobile is age 75 or over.	116
	There is a male operator under 25 years of age that is not principal operator of the automobile.	120
	There is a male operator under 25 years of age that is principal operator of the automobile.	122
	There is a female operator of the automobile under 25 years of age.	124
*	Qualifies for Class 124 except all female operators of the automobile who are under 25 years of age have completed a satisfactory Driver Training Program as defined in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.	126
	The automobile is owned by an individual and is used in the occupation, profession or business of the insured.	130
*	Qualifies for Class 120 except all male operators of the automobile who are under 25 years of age have completed a satisfactory Driver Training Program as defined in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.	140
*	Qualifies for Class 122 except all male operators of the automobile who are under 25 years of age have completed a satisfactory Driver Training Program as defined in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.	142

Description: Fourth Position (Rating Class)	Code
Rate Class 10: Experienced Operator - licensed at least 6 years	1
Rate Class 15: Experienced Operator - Licensed at least 6 years - Age sixty-five (65) or more	2
Rate Class 17: Inexperienced Principal Operator – Licensed at least 3 years and less than 6 years	3
Rate Class 18: Inexperienced Occasional Operator - Licensed at least 3 years and less than 6 years	4
Rate Class 30: Business Use	5
Rate Class 20: Inexperienced Principal Operator – Licensed less than 3 years - No Driver Training	6
Rate Class 21: Inexperienced Occasional Operator - Licensed less than 3 years - No Driver Training	7
Rate Class 25: Inexperienced Principal Operator – Licensed less than 3 years - Driver Training	8
Rate Class 26: Inexperienced Occasional Operator - Licensed less than 3 years - Driver Training	9

Description: Fifth and Sixth Positions (Merit Rating Status)	Code
Premium, Loss and Outstanding Loss Records	Code
No merit rating credit or points apply	00
Rated operator incident free for a period of at least 6 years	99
Rated operator incident free for a period of at least 5 years but less than 6	98
Merit rating points apply	01 – 45

Part VI - Coding Section

CLASSIFICATION CODE

PRIVATE PASSENGER DEFINITION (continued)

Valid Statistical Class Code Reporting Table

Stat	Rate Class (Fourth position of Class Code)								
Class	10 (1)	15 (2)	17 (3)	18 (4)	30 (5)	20 (6)	21 (7)	25 (8)	26 (9)
110	1101		1103	1104		1106	1107	1108	1109
115		1152	1153	1154		1156	1157	1158	1159
116		1162	1163	1164		1166	1167	1168	1169
120	1201			1204			1207		
122	1221		1223			1226			
124	1241		1243	1244		1246	1247		
126	1261		1263	1264				1268	1269
130					1305				
140	1401			1404					1409
142	1421		1423					1428	



Part VI - Coding Section

CLASSIFICATION CODE

MISCELLANEOUS RATED AS PRIVATE PASSENGER DEFINITION

	Code		
Description (Merit Rating does not apply)	Liability	Physical Damage	
Snowmobiles	042600	042600	
Antique Motor Cars and Antique Motorcycles	048300	048300	
Golfmobiles (motorized)	049500	049500	
Lawnmowers (motorized)	049500	049500	

	Code		
Description: First Four Positions (Merit Rating does apply)	Liability	Physical Damage	
Electric (Private Passenger)	0400	0400	
Trailers designed for use with Private Passenger Motor Vehicles		0453	
Travel Trailers – Including Mobile Home Trailers not on an enclosed foundation		0459	
Motor Homes (Self Propelled) – Not including Camping Trailers, Travel Trailers and Mobile Homes	0455	0455	
Low Speed Vehicles	0460	0460	
Vehicles Carrying School Children (Seating 0-9 passengers) Not registered for Carrying Passengers for hire	0539	0539	

 \star

Description: Fifth and Sixth Positions (Merit Rating Status)	Code	
Premium, Loss and Outstanding Loss Records	304 0	
No merit rating credit or points apply	00	
Rated operator incident free for a period of at least 6 years	99	
Rated operator incident free for a period of at least 5 years but less than 6	98	
Merit rating points apply	01 – 45	

Part VI - Coding Section

CLASSIFICATION CODE

PRIVATE PASSENGER MOTORCYCLE DEFINITION

- Motorcycles (including Motorbikes)
- Motorscooters (including Scootmobiles, Safticycles, Motorglides)
- Mopeds
- Similar Motor Vehicles

Description: First Four Positions (Statistical Class)		Code			
Dating		Standar	A into the (OF)		
Rating Group	Cubic Centimeter Engine Displacement	Experienced Operator 🖈	Inexperienced Operator	Age sixty-five (65) or more	
Group A	C.C. Displacement to 70	0408	0508	0608	
	C.C. Displacement 71 – 100	0409	0509	0609	
Group B	C.C. Displacement 101 – 125	0410	0510	0610	
	C.C. Displacement 126 – 200	0411	0511	0611	
	C.C. Displacement 201 – 275	0412	0512	0612	
	C.C. Displacement 276 – 350	0413	0513	0613	
Group C	C.C. Displacement 351 – 500	0414	0514	0614	
	C.C. Displacement 501 – 650	0415	0515	0615	
★ Group D	C.C. Displacement 651 – 750	0416	0516	0616	
	C.C. Displacement 751 – 850	0417	0517	0617	
	C.C. Displacement 851 - 950	0418	0518	0618	
	C.C. Displacement 951 – 1050	0419	0519	0619	
	C.C. Displacement 1051 – 1150	0420	0520	0620	
	C.C. Displacement 1151 – 1250	0421	0521	0621	
	C.C. Displacement 1251 – 1350	0422	0522	0622	
	C.C. Displacement 1351 – 1450	0423	0523	0623	
	C.C. Displacement 1451 – 1550	0424	0524	0624	
	C.C. Displacement 1551 – 1650	0425	0525	0625	
	C.C. Displacement 1651 – 1750	0427	0527	0627	
	C.C. Displacement 1751 – 1850	0428	0528	0628	
	C.C. Displacement 1851 – 1950	0429	0529	0629	
	C.C. Displacement 1951 – 2050	0430	0530	0630	
	C.C. Displacement over 2050	0431	0531	0631	

Part VI - Coding Section

CLASSIFICATION CODE

PRIVATE PASSENGER MOTORCYCLE DEFINITION (continued)

 \star

Description: Fifth and Sixth Positions (Merit Rating Status)	
Premium, Loss and Outstanding Loss Records	Code
No merit rating credit or points apply	00
Rated operator incident free for a period of at least 6 years	99
Rated operator incident free for a period of at least 5 years but less than 6	98
Merit rating points apply	01 – 45

Part VI - Coding Section

CLASSIFICATION CODE

NON-OWNED AUTOMOBILES DEFINITION

	Code	
Description	Liability Physica Damage	
Use of Other Automobiles Coverage	902000	902000
Named Non-Owner Automobiles Policy	902000	902000
All Other	700000	700000

SPECIAL RATING AND ADJUSTMENT DEFINITION

	Code	
Description	Liability Phy Dar	
Public Transit Discount (Commuter Discount)	190000	190000
Non-Cedable Limits	800000	
All Other	998000	998000

Part VI - Coding Section

MODEL YEAR CENTURY CODE

• Model Year Century Code is a one digit numeric code that corresponds to the century of the model year of the vehicle which is denoted by the first position of the model year

Examples:

Vehicle	Model Year	Century	Code
Dodge Colt	1989	1900	1
Ford Escort	1996	1900	1
Toyota Camry	2000	2000	2

Part VI - Coding Section

★ ANNUAL MILEAGE CODE

- The Annual Mileage Code is a three digit numeric code that shall be reported on all Private Passenger records
- The vehicle's annual mileage shall be rounded to the nearest hundred miles and the rounded miles are used to develop the Annual Mileage Code
- If the annual mileage is 100,000 or greater, report Annual Mileage Code 999
- If the annual mileage is not available, report Annual Mileage Code 999

Examples:

Annual Mileage	Annual Mileage (rounded to the nearest hundred miles)	Code
100,000	100,000	999
15,065	15,100	151
5,000	5,000	050
500	500	005
Not Available	Not Available	999

Part VI - Coding Section

MODEL YEAR CODE

 Model Year Code is a two digit numeric code that corresponds to the third and fourth positions of the model year of the vehicle

Examples:

Vehicle	Model Year	Code
Dodge Colt	1989	89
Ford Escort	1996	96
Toyota Camry	2000	00

Part VI - Coding Section

CLASS GROUP CODE

- \star
- This code is valid for Policy Effective Years 2002 and prior.
- For voluntary business, companies may optionally use Class Group Code 1.

Description	Code
Voluntary	0
Ceded – Private Passenger	1

Part VI - Coding Section

PARTIAL/TOTAL LOSS INDICATOR

- This field applies to Property Damage Liability and Physical Damage Losses only
- Non-vehicle claims should be coded as a partial loss (Partial/Total Loss Indicator 1)

• For additional information regarding the reporting of partial/total losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan

Description	Code
Partial Loss	1
Total Vehicle Loss	2

Part VI - Coding Section

PASSIVE RESTRAINT DEVICE DISCOUNT CODE

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

Description	Code
No Discount	0
Discount Applies • Vehicle contains at least one of the following occupant safety features: an	
airbag installed for either the driver's seating position or both front outboard designated seating positions or an automatic seatbelt installed for either the driver's seating position or both front outboard designated seating positions.	1



Part VI - Coding Section

DISCOUNT CODE

*

• For specific details relative to the application of the discounts listed below, refer to Rule 19 (Discounts) of the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual.

Description	Code	
Mandatory for Policies Effective 1/1/09 and Subsequent and Optional for Policies Effective 4/1/08-12/31/08:		
All Other Discount Applies	А	
All Other and Multi-Car Discounts Apply	В	
All Other and Annual Mileage Discounts Apply	С	
All Other, Multi-Car and Annual Mileage Discounts Apply	D	
All Other and Motorcycle Rider Training Discounts Apply	E	
For Policies Effective 7/1/06 and Subsequent and Optional fo	Policies Effective 1/1/06-6/30/06:	
Multi-Car Discount Applies	1	
Annual Mileage Discount Applies **	2	
Multi-Car Discount and Annual Mileage Discount Apply	4	
Motorcycle Rider Training Discount Applies	6	
No Discount Applies	0	

Description (For Policies Effective Prior to 1/1/06 and Optional for	Multi-Car Status * Exists	Multi-Car Status * Does Not Exist
Policies Effective 1/1/06-6/30/06)	Co	de
Multi-Car Discount Applies (Rate Class 10 and 15 only)	1	
Annual Mileage Discount Applies **	2	3
Multi-Car Discount (Rate Class 10 and 15 only) and Annual Mileage Discount Apply	4	
Motorcycle Rider Training Discount Applies		6
No Discount Applies	5	9

^{*} Multi-Car Status is defined as "An individual, (or husband and wife resident in the same household) who owns two or more automobiles ... At least two of the automobiles must be classified as use class 10, 15 or 30. The premium reduction applies only to Class 10 and 15 automobiles". Therefore Multi-Car Status may exist but the Multi-Car Discount may not be applicable.

^{**} The Annual Mileage Discount does not apply to other than collision coverage, therefore, when only other than collision coverage is afforded and no other discounts apply, code space or zero (0) for the Discount Code.

Part VI - Coding Section

★ CONTINUOUS COVERAGE DISCOUNT CODE

- This discount applies to Bodily Injury, PIP (No-Fault) and Property Damage coverages only.
- If the Continuous Coverage Discount does not apply, report zero or space.

Description	Code
Discount Applies	1

Part VI - Coding Section

★ LOW FREQUENCY DISCOUNT CODE

- This discount applies to Bodily Injury, PIP (No-Fault) and Property Damage coverages only.
- If the Low Frequency Discount does not apply, report zero or space.

Description	Code
Discount Applies	1

Last Revision Date: 04/01/2010 **Page: VI:24** Print Date: 02/23/2010

Part VI - Coding Section

PRODUCER CODE

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

Examples:

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

Part VI - Coding Section

ZIP CODE

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

Examples:

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

Part VI - Coding Section

EXPOSURE

		Sept Sept Sept Sept Sept Sept Sept Sept	200 1 200 1
5 Juli 6 Agris Sepris Oci 15 Novis Decis Control oci 10 Oci 15 Oc	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1	1 Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1
O O O O O O O O O O	Julis Augis Septis Oca15 Nov15 Doc 15 1 0<	1	1
O O O O O O O O O O	Julis Augis Septis Ocatis Novis Decis 1 0<	1 Muts Augis Septis Octis Novis Decis 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Muts Augis Septis Octis Novis Decis 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation and the control ocatio	1	1
Multiple	Julis Augis Septis Ocatis Novis Doects 0 1 0	1 Julis Augis Septis Ocatis Novis Decis 1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Julis Augis Septis Ocatis Novis Decis 1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
O O O O O O O O O O	Julis Augis Septis Ocatis Nov.15 Doc.15 1 0	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation
O O O O O O O O O O	1	1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1	1
O O O O O O O O O O	1 Mis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1	1
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1	1
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation and the control ocatio	1	1
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation and the control ocatio	1	1
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation and the control ocatio	1	1
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1	1
O O O O O O O O O O	1	1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
O O O O O O O O O O	14 14 13 12 11 10 9 8 7 6 15 11 11 10 9 8 1 12 11 11 10 11 11 10 11 11 11 10 11 11 11	1 Muts Augis Septis Octis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Muts Augis Septis Octis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
O O O O O O O O O O	Julis Augis Septis Ocatis Nov.15 Doc.15 1 0	1 Muts Augis Septis Octis Novis Decis 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Muts Augis Septis Octis Novis Decis 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Multiple	Julis Augis Septis Ocatis Novis Doects 0 1 0	1 Julis Augis Septis Ocatis Novis Decis 1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Julis Augis Septis Ocatis Novis Decis 1 Julis Augis Septis Ocatis Novis Decis 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Multiple	Julis Augis Septis Ocatis Novis Doects 0 1 0	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation
O O O O O O O O O O	1 Muls Augis Septis Ocatis Novis Decis 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
O O O O O O O O O O	1 Muts Augis Septis Ocatis Novis Decision of the control of the control ocation and the control ocatio	1	1
O O O O O O O O O O	Julis Augis Septis Ocatis Nov.15 Doc.15 1 0	1 Muts Augis Septis Octis Novis Decis 2 1 0 0 1 1 0 0 2 1 1 0 0 2 1 1 0 0 3 2 1 1 0 4 3 2 1 1 0 5 4 4 3 2 2 1 0 10 9 8 7 6 5 4 3 10 10 9 8 7 6 5 5 4 11 10 9 8 7 6 5 5 4 12 11 10 9 8 7 6 5 6 13 12 11 10 9 8 7 6 14 13 12 11 10 9 8 7 6 15 14 13 12 11 10 9 8 7 16 15 14 13 12 11 10 9 8 16 15 14 13 12 11 10 10 9 17 16 15 14 13 12 11 10 10 18 17 16 15 14 13 22 21 20 19 18 17 16 15 23 22 21 20 19 18 17 16 24 23 22 21 20 19 24 23 22 21 20 21 27 24 23 22 21 20 21	1 Muts Augis Septis Octis Novis Decis 2 1 0 0 1 1 0 0 2 1 1 0 0 2 1 1 0 0 3 2 1 1 0 4 3 2 1 1 0 5 4 4 3 2 2 1 0 10 9 8 7 6 5 4 3 10 10 9 8 7 6 5 5 4 11 10 9 8 7 6 5 5 4 12 11 10 9 8 7 6 5 6 13 12 11 10 9 8 7 6 14 13 12 11 10 9 8 7 6 15 14 13 12 11 10 9 8 7 16 15 14 13 12 11 10 9 8 16 15 14 13 12 11 10 10 9 17 16 15 14 13 12 11 10 10 18 17 16 15 14 13 22 21 20 19 18 17 16 15 23 22 21 20 19 18 17 16 24 23 22 21 20 19 24 23 22 21 20 21 27 24 23 22 21 20 21
Multiple	Muls Augis Septis Ocats Novis Decision of the control of the control ocats and the control ocats and the control ocats ocats and the control ocats ocats and the control ocats	1 Muts Augis Septis Ocatis Novis Decis 1	1 Muts Augis Septis Ocatis Novis Decis 1
O O O O O O O O O O	1 Mis Augis Septis Ocatis Novis Decis 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15	1 Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15
O O O O O O O O O O	Julis Augis Septis Oca15 Nov.15 Doc.15 1 0	1 Juli 5 Augi 5 Sep 15 Ocd 15 Nov 15 Dec 15 2 1 0 0 1 1 0 0 2 1 1 0 0 2 1 1 0 0 2 1 1 0 0 3 2 1 1 0 0 4 3 2 1 0 0 6 5 4 4 3 2 1 0 7 6 5 4 4 3 2 10 9 8 7 6 5 4 3 10 9 8 7 6 5 6 11 10 9 8 7 6 5 12 11 10 9 8 7 6 13 12 11 10 9 8 7 6 14 13 12 11 10 9 8 7 6 15 14 13 12 11 10 10 9 16 15 14 13 12 11 10 10 17 16 15 14 13 12 11 18 17 16 15 14 13 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 Juli 5 Augi 5 Sep 15 Ocd 15 Nov 15 Dec 15 2 1 0 0 1 1 0 0 2 1 1 0 0 2 1 1 0 0 2 1 1 0 0 3 2 1 1 0 0 4 3 2 1 0 0 6 5 4 4 3 2 1 0 7 6 5 4 4 3 2 10 9 8 7 6 5 4 3 10 9 8 7 6 5 6 11 10 9 8 7 6 5 12 11 10 9 8 7 6 13 12 11 10 9 8 7 6 14 13 12 11 10 9 8 7 6 15 14 13 12 11 10 10 9 16 15 14 13 12 11 10 10 17 16 15 14 13 12 11 18 17 16 15 14 13 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
O O O O O O O O O O	Julis Augis Septis Ocatis Nov.15 Dec 15 1 0	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation
Multipose to the total control of the total control	Julis Augis Septis Ocatis Novis Doects 0 1 0	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Doc 15 1 0 <t< td=""><td>Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Doc 15 1 0 <t< td=""></t<></td></t<>	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Doc 15 1 0 <t< td=""></t<>
O O O O O O O O O O	Julis Augis Sep 15 Oca 15 Nov 15 Doc 15 1 0	1415 Ag15 Sep 15 Oct 15 Nov 15 Dec 15 2 1 0 0 2 1 0 0 2 1 0 0 2 1 0 0 3 2 1 0 0 4 3 2 1 0 5 4 3 2 1 0 7 6 5 4 3 3 2 11 10 9 8 7 6 5 12 11 10 9 8 7 6 13 12 11 10 9 8 7 14 13 12 11 10 9 8 7 15 14 13 12 11 10 9 16 15 14 13 12 11 10 9 17 16 15 14 13 12 11 18 17 16 15 14 19 18 17 16 15 20 19 18 17 16 15 21 20 19 18 17 16 22 21 20 19 18 17 16 23 22 21 20 19 18 17 16 24 3 3 5 5 6 25 21 20 19 18 17 16 26 22 21 20 19 18 17 16 27 20 19 18 17 16 28 20 19 18 17 16 29 20 19 18 17 16 20 20 19 18 17 16 20 20 19 18 17 16 21 20 19 18 17 16 22 21 20 19 18 17 16 23 22 21 20 19 18 17 16 24 3 3 5 5 5 70 70 10	1415 Ag15 Sep 15 Oct 15 Nov 15 Dec 15 2 1 0 0 2 1 0 0 2 1 0 0 2 1 0 0 3 2 1 0 0 4 3 2 1 0 5 4 3 2 1 0 7 6 5 4 3 3 2 11 10 9 8 7 6 5 12 11 10 9 8 7 6 13 12 11 10 9 8 7 14 13 12 11 10 9 8 7 15 14 13 12 11 10 9 16 15 14 13 12 11 10 9 17 16 15 14 13 12 11 18 17 16 15 14 19 18 17 16 15 20 19 18 17 16 15 21 20 19 18 17 16 22 21 20 19 18 17 16 23 22 21 20 19 18 17 16 24 3 3 5 5 6 25 21 20 19 18 17 16 26 22 21 20 19 18 17 16 27 20 19 18 17 16 28 20 19 18 17 16 29 20 19 18 17 16 20 20 19 18 17 16 20 20 19 18 17 16 21 20 19 18 17 16 22 21 20 19 18 17 16 23 22 21 20 19 18 17 16 24 3 3 5 5 5 70 70 10
O O O O O O O O O O	Julis Augis Septis Ocatis Nov.15 Decision 1 0 <t< td=""><td>1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation ocation</td><td>1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation ocation</td></t<>	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation
Multipose to the post of the p	Muls Augis Septis Celts Nov15 Decis 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 Muts Augis Septis Ocatis Novis Decision of the control ocatis and the control ocation and	1 Muts Augis Septis Ocatis Novis Decision of the control ocatis and the control ocation and
O O O O O O O O O O	Julis Augis Septis Ocatis Nov.15 Doc.15 1 0	14 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 2 1 0 0 1 1 0 0 2 1 1 0 0 2 1 1 0 0 3 2 1 1 0 0 4 3 2 1 0 0 5 4 4 3 2 2 1 0 6 5 4 4 3 2 2 1 7 6 5 5 4 4 3 10 9 8 7 6 5 5 11 10 9 8 7 6 5 12 11 10 9 8 7 6 13 12 11 10 9 8 7 14 13 12 11 10 9 8 7 15 14 13 12 11 10 9 8 7 16 15 14 13 12 11 10 10 9 16 15 14 13 12 11 10 10 9 17 16 15 14 13 12 11 10 10 9 18 17 16 15 14 13 12 11 10 10 10 10 10 10 10 10 10 10 10 10	14 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 2 1 0 0 1 1 0 0 2 1 1 0 0 2 1 1 0 0 3 2 1 1 0 0 4 3 2 1 0 0 5 4 4 3 2 2 1 0 6 5 4 4 3 2 2 1 7 6 5 5 4 4 3 10 9 8 7 6 5 5 11 10 9 8 7 6 5 12 11 10 9 8 7 6 13 12 11 10 9 8 7 14 13 12 11 10 9 8 7 15 14 13 12 11 10 9 8 7 16 15 14 13 12 11 10 10 9 16 15 14 13 12 11 10 10 9 17 16 15 14 13 12 11 10 10 9 18 17 16 15 14 13 12 11 10 10 10 10 10 10 10 10 10 10 10 10
Mulfish Augifs Septifs Ocitifs Novifs Decrifs 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Muls Augis Septis Cedis Novis Decis 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation
Mulfs Augifs Septis Ocidifs Novis Decision of the control of the control ocidifs ocidificate ocidifs ocidifs ocidifs ocidificate ocidifs ocidifs ocidifs ocidifs ocidifs ocidi	Julis Augis Sep 15 Ocd 15 Nov 15 Doc 15 1 0	1	1
O	Muls Augis Septis Cedis Novis Decis 1	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation	1 MIS Augis Septis Ocatis Novis Decision of the control of the control ocation of the control ocation
Mulfs Augifs Septifs Ocid15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""><td>Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""><td>Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""></t<></td></t<></td></t<>	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""><td>Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""></t<></td></t<>	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""></t<>
Multis Augits Septis Ocitis Novis Decision of the control ocitis	Muls Augis Septis Oca15 Nov15 Dec15 Julis Augis Septis Oca15 Nov15 Dec15 2 1 0 0 1 1 0 0 2 1 1 0 0 2 4 3 2 1 0 0 4 3 2 1 0 0 5 4 4 3 2 2 1 0 6 5 4 4 3 2 2 1 7 6 5 5 4 3 2 1 10 9 8 7 6 5 5 4 11 10 9 8 7 6 5 5 11 10 9 8 7 6 5 6 12 11 10 9 8 7 6 5 13 12 11 10 9 8 7 6 14 13 12 11 10 9 8 7 15 14 13 12 11 10 9 16 15 14 13 12 11 10 10 17 16 15 14 13 12 11 18 17 16 15 14 13 19 18 17 16 15 14 13 10 19 16 15 14 13 11 10 10 10 10 10 10 10 10 11 11 11 11 11 11 11 11 11 11 11 11 1	1	1
14 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 1	Mulis Augis Septis Ocatis Noviis Decision of the control of the control ocatis and the control ocation and the control ocatis and the control ocation and the co	1 M 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1	1 M 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1
Mulfs Augifs Septis Ocidifs Novis Decision of the control of the control ocidifs ocidificate ocidifs ocidifs ocidifs ocidificate ocidifs ocidifs ocidifs ocidifs ocidifs ocidi	1 M 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1	1
Multis Augis Septis Ocitis Novis Decis Multis Augis Septis Ocitis Novis Decis 0 0 0 0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	1 M 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1	1 M 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1
Mulfs Augifs Septifs Ocitifs Novifs Decrifs 1 0 0 0 0 15	Muls Augis Septis Ocatis Novis Decision of the control ocatis and the control ocation and the	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""><td>Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""></t<></td></t<>	Jul 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 0 1 0 <t< td=""></t<>
Mulfs Augifs Septis Ocidifs Novifs Decision of the control ocidifs and the control ocidifs ocidificate ocidifs ocidifs ocidifs ocidificate ocidifs ocidificate ocidifs ocidificate ocidifs ocidificate ocidifs ocidificate ocidifs ocidificate	Muls Augis Septis Ocatis Novis Decision of the control ocation	10 b b b b b b b b b b b b b b b b b b b	10 b b b b b b b b b b b b b b b b b b b
1415 Aug15 Sep15 Oct15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Mulis Augis Septis Ocatis Noviis Decision of the control ocatis and the control ocatis and the control ocatis ocat	Muls Augis Septis Ocatis Nov15 Decision of the control ocation	Muls Augis Septis Ocatis Nov15 Decision of the control ocation
Muls Awg15 Sep15 Ocd15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Mulis Augis Septis Octis Novis Decis 0	1	1
Mulfs Augifs Septis Ocitifs Novifs Decision of the control ocitifs and the control ocitifs ocitifs ocitifs ocitifs ocitifs ocitifs and the control ocitifs and the control ocitifs and the control ocitifs ocitifs and the control ocities are control ocities.	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	1 M 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 M 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Mulfs Augifs Septifs Ocitifs Novifs Decrifs 1 0 0 0 15 0 15 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Mulfs Augifs Septis Ocidifs Novis Decision of the control ocidity ocid	Muls Augis Septis Ocatis Novis Decision of the control ocation	1	1
1415 Aug15 Sep15 Oci 15 Nov15 Dec15 14 3 2 1 0 0 2 4 4 3 2 1 0 4 4 3 2 1 0 5 4 4 3 2 1 7 6 5 4 3 2 10 9 8 7 6 5 4 11 10 9 8 7 6 13 12 11 10 9 8 7 13 12 11 10 9 8 7 13 12 11 10 9 8	Mulis Augis Septis Ocatis Noviis Decision of the control ocatis and the control ocation and	Muls Augis Septis Ocatis Nov15 Dects 1	Muls Augis Septis Ocatis Nov15 Dects 1
Mulfs Augifs Septifs Ocid15 Nov15 Dec 15 Mulfs Augifs Septifs Ocid15 Nov15 Dec 15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Mulfs Augifs Septis Ocid15 Nov15 Decis Mulfs Augifs Septis Ocid15 Nov15 Decis 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	JM 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1	1	1
14 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 14 4 3 2 1 0 2 4 4 3 2 1 0 3 5 6 4 3 2 1 7 6 5 4 3 2 10 9 8 7 6 5 6 11 10 9 8 7 6 12 11 10 9 8 7 6 12 11 10 9 8 7 6 12 11 10 9 8 7 6	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	JM 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1	JM 15 Aug 15 Sep 15 Ocd 15 Nov 15 Dec 15 1
Mulfs Augifs Septifs Ocid15 Nov15 Dec15 1 0 0 0 15 Dec15 1 0 0 0 0 15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulfs Aug15 Sep15 Oct15 Nov15 Dec15 1	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 1	1	1
Mulf5 Aug15 Sep15 Od15 Nov15 Dec15 14 4 3 2 1 0 0 5 4 4 3 2 1 0 6 5 4 3 2 1 7 6 5 5 4 3 10 9 8 7 6 5 5 4 11 0 0 0 12 1 0 0 13 2 1 0 14 3 2 1 15 6 5 5 4 16 9 8 7 6 5 5 4 17 0 0 0 18 1 7 6 5 5 4 19 9 8 7 6 5 5 4 10 0 0 0 11 0 0 0 0 12 0 0 0 0 13 0 0 0 0 14 0 0 0 0 15 0 0 0 0 16 0 0 0 0 17 0 0 0 0 18 0 0 0 0 0 19 0 0 0 0 0 10 0 0 0 0 0 10 0 0 0 0 0 10 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct
Mulfs Augifs Septifs Oci 15 Novi 15 Dec 15 Jul 15 Augifs Septifs Oci 15 Novi 15 Dec 15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Oct15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Muls Augis Septis Oca15 Nov15 Dec15 1	1	1
14 6 Aug15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 1	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct
Mulfs Augifs Septifs Oci 15 Novi 15 Dec 15 Oci 1	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Oct15 Nov15 Dec15 1	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Jul 15 Aug 15 Sep 15 Oct 15 Dec 15 2 1 0 0 2 1 0 0 4 4 3 2 1 0 5 4 4 3 2 1 7 6 6 5 4 3 8 7 6 6 5 4 3	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Jul 15 Aug 15 Sep 15 Oct 15 Dec 15 2 1 0 0 2 1 0 0 4 4 3 2 1 0 5 4 4 3 2 1 7 6 6 5 4 3 8 7 6 6 5 4 3
Mulf5 Aug15 Sap15 Od15 Nov15 Dec15 Jul 15 Aug15 Sap16 Od15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulfs Aug15 Sap15 Od15 Nov15 Dec15 Jul 16 Aug15 Sap16 Od15 Nov15 Dec15 0 0 1 0 0 0 1 0 0 0 1 0 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Oct15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	1	1
Mulf5 Aug15 Sep15 Od15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Mul5 Aug15 Sep15 Ocd15 Nov15 Dec15 1	Mul5 Aug15 Sep15 Ocd15 Nov15 Dec15 1
Mulf5 Aug15 Sap15 Od15 Nov15 Dec15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Ocd15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Oct15 Nov15 Dec15 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	JM 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 2 1 0 0 4 3 2 1 0 5 4 3 2 1 0	1	1
Mulf5 Aug15 Sap15 Od15 Nov15 Dec15 Jul 15 Aug15 Sap15 Od15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulfs Aug 15 Sep 15 Od 15 Nov 15 Dec 15 Jul 16 Aug 15 Sep 16 Od 15 Nov 15 Dec 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Oct15 Nov15 Dec15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Nov 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Nov 15 Oct 15 Oc
Multis Augits Sapits Oddis Novits Deets Julis Augits Sapits Oddis Novits Deets O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulfs Aug15 Sep15 Od15 Nov15 Dec15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Ocd15 Nov15 Dec15 0 0 10 0 0 10 0 0 10 0 0 10 0 0 10	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Od15 Nov15 Dec15	Muls Augis Sep 15 Oct 15 Nov 15 Dec 15 Oct 1	Mulf5 Aug15 Sep 15 Oct 15 Nov15 Dec 15 Oct 1	Mulf5 Aug15 Sep 15 Oct 15 Nov15 Dec 15 Oct 1
Multis Augits Sapits Oct 15 Nov 15 Dec 15 Oct 15 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulfis Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Nov 15 Dec 15 Oct 15 Nov 15 Dec 15 Oct 15 Nov 15 Dec 15 Oct 15 Oct 1	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
Mulf5 Aug15 Sep15 Ocd15 Nov15 Dec15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc
10 to	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 Oc	14 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 1 Oct 15 O	14 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15 Oct 15 1 Oct 15 O
Mulfs Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Maris Augris Sapris Ocaris Novris Decris	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Mulf5 Aug15 Sep15 Ocd15 Nov15 Dec15	Julis Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Jul 15 Aug 15 Sap 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	10 to	10 to
Jul 15 Aug 15 Sep 15 Od 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
M 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
by the by	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Multis Augits Septis Ocatis Novits Decis	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Julis Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Julis Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Jul 15 Aug 15 Sap 15 Oct 15 Nov 15 Dec 15	10 to	10 to	10 to
Ud 15 ho	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	10 to	10 to
U	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	16 to	16 to
10 to	Julis Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Mulfs Augits Septis Oca15 Nov15 Dec15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Multis Augris Septis Ocitis Novits Decis	10 to	Units Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Units Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Units Augits Sapits Ocitis Novits Decis	10 to	10 to	10 to
U	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	10 to	10 to
Ud 15 Aug15 Sep 15 Od 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	10 to	Units Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Units Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Units Augris Septis Ocitis Nov.15 Dec.15	10 to	10 to	10 to
Up to	14 15 Aug15 Sep 15 Oct 15 Nov 15 Dec 15	10 to	10 to
U	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
Unit Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	10 to	Units Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Units Aug 15 Sep 15 Oct 15 Nov 15 Dec 15
10 to	10 to	10 to	10 to
10 to	10 to	10 to	10 to
10 to	10 to	0	0
to t	Maris Augris Septis Ocaris Novris Decris	10 to	10 to
10 to 14.5 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Jul 15 Aug 15 Sep 15 Oct 15 Nov 15 Dec 15	Units Augits Septis Ocats Novis Decis	Units Augits Septis Ocats Novis Decis
10 to	10 to	to t	to t
10 to	10 to	10 to	10 to
Jul 15 Auro 15 Sen 15 Oct 15 Name 15	to t	to t	to t
to t	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	to t	to t
to to to	0 0 0	0 0 0	0 0 0
to to to to	of of of	to to to	to to to
5 5 5	5 5	to to	to to
2 2 2	<u> </u>	5	5
	2		
	91/02 0189 0189 0189 0189 0189 0189 0189 0189	SLACK SIGN SIGN SIGN	SLACK SIGN SIGN SIGN
	2012 Sept 2012 S	200 1 200 1	200 1 200 1
	34 Nov. 18 Nov. 18	September 18 Nov 18 Nov 18 Nov 18	200 1 200 1
	July Aug 16 Sept 6 Oct 16 Nov 16	34 Nov. 18 Nov. 18	2012 Sept 2012 S
		Strong of the Country	Strong of the Country
		Strong of the Country	Strong of the Country
		Strong of the Country	Strong of the Country
		Strong of the Country	Strong of the Country
		Strong of the Country	Strong of the Country
		Strong of the Country	Strong of the Country
		Strong of the Country	Strong of the Country
	91/02 0189 0189 0189 0189 0189 0189 0189 0189	SLACK SIGN SIGN SIGN	SLACK SIGN SIGN SIGN
		2000	2000

XAMPLES: The exposure for a car insured for one year is 12.

The exposure for a car insured for two years is 24.

ine exposure for a car insured for two years is 24. The exposure for a car cancelled effective between July 16 and August 15 on a policy expiring between April 16 and May 15 of the following wear is o

Part VI - Coding Section

RATE DEPARTURE FACTOR CODE

- \star
- This code is valid for policy effective years 2008 and prior
- The Rate Departure Factor Code is a three digit numeric code reflecting the decimal complement of the deviation percentage approved by the Division of Insurance for the policy
- If multiple deviation percentages exist for a vehicle, the decimal complements of the deviation percentages must be multiplied and then use the rounded product to develop the Rate Departure Factor Code
- If no rate deviation exists, report Rate Departure Factor Code 100

For Single Deviations:

Examples:

Deviation Percentage	Decimal Complement	Code
3.0	.970	970
10.0	.900	900
12.5	.875	875
None	None	100

For Multiple Deviations:

Examples:

Deviation Percentage #1	Decimal Complement	Deviation Percentage #2	Decimal Complement	Product of Complements	Code
3.0	.970	10.0	.900	.873000	873
5.0	.950	7.5	.925	.878750	879
7.5	.925	12.5	.875	.809375	809

Part VI - Coding Section

CLAIM IDENTIFICATION NUMBER

- Claim Identification Number is a sixteen position alphanumeric code
- It is mandatory to report at least three characters
- Claim ID should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: b)
- Refer to Section B Losses of the General Reporting Requirements Section for additional information on accident reporting

Examples:

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

Part VI - Coding Section

POLICY IDENTIFICATION NUMBER

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

Examples:

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

Part VI - Coding Section

VEHICLE IDENTIFICATION NUMBER

- Vehicle Identification Number (VIN) is a five to seventeen position alphanumeric code
- VIN should be left justified with no blanks between significant digits and all unused positions must be coded as spaces (denoted as: *b*)
- For Losses: If a claim is incurred on an insured's policy, that does not involve a vehicle named on said policy, the losses may be coded as 97 followed by fifteen zeros (9700000000000000000)

Examples:

Vehicle Identification Number	Code
1FABP28A6FF143890	1FABP28A6FF143890
1C3BH41J6MN109186	1C3BH41J6MN109186
ZC2FP1101KB202230	ZC2FP1101KB202230
GV5VK3212B	GV5VK3212B <i>bbbbbbb</i>
MA12345	MA12345bbbbbbbbbbb

Liability Only

This section applies to liability records only

Last Revision Date: 01/01/2000 Print Date: 01/01/2000

Part VI - Coding Section

LIABILITY LIMITS CODE

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

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

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

MEDICAL PAYMENTS	
Limits of Liability	Code
\$ 500	01
750	02
1,000	03
2,000	04
5,000	05
10,000	06
15,000	07
20,000	80
25,000	09
50,000	10 ***
100,000	11 ***
All Other Limits Not Above	49 ****
No Medical Payments	00

UNDERINSURED AUTO			
Limits of Liability		Code	
Per Claim	Per Accident	Code	
\$ 20,000	\$ 40,000	04 **	
20,000	50,000	11	
25,000	60,000	05	
25,000	50,000	06	
30,000	70,000	12	
35,000	80,000	13	
50,000	100,000	07	
100,000	300,000	08	
250,000	500,000	09	
500,000	500,000	15 #	
500,000	1,000,000	10 ***	
1,000,000	1,000,000	14 ***	
All Other Limits Not Above		49	
No Underinsured Auto		00	

- * If both mandatory (code 01) and optional (code 04) Bodily Injury coverage are purchased, Limits Code 04 must be reported.
- ** If the 20/40 limit of Underinsured Auto coverage is purchased, although there is no associated cost, Limits Code 04 must be reported.
- *** This limit is available for voluntary business only.
- **** Optional for policies effective 1/1/05 12/31/05 and mandatory for policies effective 1/1/06 and subsequent.
- ★ # Mandatory for policies effective 4/1/07 and subsequent.

TYPE OF LOSS CODE - LIABILITY

Description	Code
Bodily Injury to Others – Excluding claims covered under Type of Loss	Code 02 01
Bodily Injury to Others – Guest claims, claims arising out of accidents off the ways of the Commonwealth or clair Massachusetts	•
Damage to Someone Else's Property (Property Damage Liability)	03
Medical Payments	05
Bodily Injury Caused by an Uninsured Automobile	06
Bodily Injury Caused by an Underinsured Automobile	07
Bodily Injury to Others – Inter or Intra Company Reimbursements resu PIP (No-Fault) claims (excluding claims cove Type of Loss Code 14)	
Bodily Injury to Others – Inter or Intra Company Reimbursements result PIP (No-Fault) claims arising out of accidents off the ways of the Commonwealth or claim Massachusetts	occurring 14
All Other types – Liability • (Mandatory for policies effective 1/1/09 and subsequent and or policies effective 4/1/08-12/31/08	otional for 09



No-Fault Only

This section applies to no-fault records only

Last Revision Date: 01/01/2000 Print Date: 01/01/2000

PIP COVERAGE CODE

Description	Code
Basic PIP (No-Fault) Coverage Only	1

PIP DEDUCTIBLE CODE

Description	Deductible Amount	Code
Full Coverage	\$ 0	01
	\$ 100	12
	250	13
	500	14
Named Insured	1,000	15
	2,000	16
	4,000	17
	8,000	18
	\$ 100	22
	250	23
Named Insured and Members of Household	500	24
	1,000	25
	2,000	26
	4,000	27
	8,000	28

TYPE OF CLAIMANT CODE

Description	Code
Named Insured	1
Member of Insured's Household	2
Other Occupant	3
Pedestrian	4

TYPE OF LOSS CODE – PIP (NO-FAULT)

Description	Code
Non-Split Outstanding Loss	23
Medical Loss	24
Wage Loss	34
Other Economic Loss	44
Subrogation Recovery	45
All Other types – No-Fault	
 (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08 	09

*

Physical Damage Only

This section applies to physical damage records only

Last Revision Date: 01/01/2000 Print Date: 01/01/2000

OTHER THAN COLLISION COVERAGE CODE

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

OTC Coverage with Full Glass Coverage			
Description	Code		
Description	Towing and Labor Costs Coverage		Coverage
	\$50 Included	★ \$100 Included	Excluded
Comprehensive Coverage			
\$ 300 Deductible	234	434	035
\$ 500 Deductible	236	436	037
\$1,000 Deductible	238	438	039
\$2,000 Deductible	222	422	023
All Other Deductibles with Full Glass Coverage	264	464	004
Fire Only	265	465	005
Fire and Theft	266	466	006
Fire, Theft and Combined Additional Coverage	268	468	800
Stated Amount	060		
Agreed Amount	063		

OTC Coverage with Optional \$100 Glass Deductible			
Description	Code		
Description	Towing and Labor Costs Coverage		Coverage
	\$50		
Comprehensive Coverage			
\$ 300 Deductible	334	534	135
\$ 500 Deductible	336	536	137
• \$1,000 Deductible	338	538	139
\$2,000 Deductible	322	522	123
All Other Deductibles with Optional \$100 Glass Deductible	364	564	104
Fire Only	365	565	105
Fire and Theft	366	566	106
Fire, Theft and Combined Additional Coverage	368	568	108

OTHER THAN COLLISION COVERAGE CODE

MISCELLANEOUS COVERAGES

Description	Code
Non-Owned Automobiles – Broad Form	056
Non-Owned Automobiles – Limited Form	057
 Towing and Labor – \$100 per disablement No other comprehensive coverage afforded Optional for policies effective 1/1/2002 – 12/31/2002. Mandatory for policies effective 1/1/2003 and subsequent. 	080
Towing and Labor – \$50 per disablement No other comprehensive coverage afforded	082
Substitute Transportation - \$15 per day/ \$450 maximum	083
Substitute Transportation - \$45 per day/\$1,350 maximum Optional for policies effective 1/1/2001 – 12/31/2001. Mandatory for policies effective 1/1/2002 and subsequent.	084
Substitute Transportation - \$30 per day/ \$900 maximum	085
Substitute Transportation - \$100 per day/ \$3,000 maximum	086
Sound Receiving and Transmitting Equipment	087
All Other Coverages – excluding Collision	089

COLLISION COVERAGE CODE

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

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

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

Miscellaneous Coverages		
Description	Code	
Stated Amount – Limited Collision	041	
Stated Amount – Collision	092	
Non-Owned Automobiles – Broad Form	096	
Non-Owned Automobiles – Limited Form	097	
All Other	099	

Part VI - Coding Section

★ VALUE CODE

PRIVATE PASSENGER MOTORCYCLES

- Motorcycles (including Motorbikes), Motorscooters (including Scootmobiles, Safticycles, Motorglides), Mopeds and similar Motor Vehicles
- Motorcycle Value is a three digit numeric code that shall be reported on all Private Passenger Motorcycle records
- The motorcycle's value shall be rounded up to the nearest hundred dollars and the rounded value is used to develop the Value Code
- If the motorcycle value is \$99,900 or greater, report Value Code 999

Examples:

Motorcycle Value	Motorcycle Value (rounded up to the nearest hundred dollars)	Code
\$101	\$200	002
\$2,550	\$2,600	026
\$15, 225	\$15,300	153
\$24,786	\$24,800	248
\$102, 322	\$102,400	999

Part VI - Coding Section

PRE-INSURANCE INSPECTION IDENTIFICATION CODE

 \star

• This code is valid for policy effective years 2009 and prior

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

Part VI - Coding Section

INTENSIFIED APPRAISAL IDENTIFICATION CODE

*

• This code is valid for policy effective years 1995 and prior

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

Part VI - Coding Section

ANTI-THEFT DEVICE DISCOUNT CODE

• Applies to other than collision coverage only



• Refer to the Anti-Theft Device Standards and Discounts Rule in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual for detailed descriptions of each category



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

Last Revision Date: 01/01/2010 **Page: VI:44** Print Date: 06/24/2010

Part VI - Coding Section

OEM COVERAGE CODE

★ • If OEM Coverage exists on a policy, but is only applicable to one of the written physical damage coverages, separate collision and other than collision physical damage statistical records must be reported.

Description	Code
OEM Coverage Applies	1
OEM Coverage Does Not Apply	0

Part VI - Coding Section

HIGH-THEFT VEHICLE CODE

• Applies to other than collision coverage only



• Refer to the High Theft Vehicle List in the Commonwealth Automobile Reinsurers' Private Passenger Automobile Insurance Manual for a list of such vehicles

Description	Code
Not Applicable	0
High-Theft Vehicle	1
High-Theft Vehicle – No Rate Adjustment Vehicle contains Category III, IV or V Anti-Theft Device or Vehicle Recovery System	2

Part VI - Coding Section

EXTRA-RISK RATING CODE

OTHER THAN COLLISION

- When multiple categories of extra-risk rating apply, code the lowest of the applicable codes
- For additional information regarding reporting extra-risk rating, refer to Section A Premiums of the General Reporting Requirements Section of this Plan

Description	Code
Not Applicable	0
Convicted of motor vehicle theft • Within the last five years	1
Convicted of auto insurance related fraud Within the last five years	2
Material misrepresentation of a Physical Damage claim Within the last five years	3
Two or more total fire claims OR two or more total theft claims Within the last three years	4
Material misrepresentation of a Physical Damage claim Within the last five years	5
Convicted of vehicular homicide Within the last five years	6
Convicted of driving under the influence of alcohol or drugs • Within the last three years	7
Four or more greater than 50% at-fault accidents • Within the last three years	8
Salvage Title – No new certificate issued	9





Part VI - Coding Section

EXTRA-RISK RATING CODE

COLLISION

- When multiple categories of extra-risk rating apply, code the lowest of the applicable codes
- For additional information regarding reporting extra-risk rating, refer to Section A Premiums of the General Reporting Requirements Section of this Plan

Description	Code
Not Applicable	0
Convicted of vehicular homicide Within the last five years	1
Convicted of motor vehicle theft Within the last five years	2
Convicted of auto insurance related fraud Within the last five years	3
Material misrepresentation of a Physical Damage claim Within the last five years	4
Material misrepresentation of a Physical Damage claim Within the last five years	5
Convicted of driving under the influence of alcohol or drugs Within the last three years	6
Four or more greater than 50% at-fault accidents Within the last three years	7
Two or more total fire claims OR two or more total theft claims • Within the last three years	8
Salvage Title – No new certificate issued	9





Part VI - Coding Section

TYPE OF LOSS CODE – PHYSICAL DAMAGE

OTHER THAN COLLISION

Description	Code
Fire	01
Theft	02
Glass	_
 For additional information on Glass Losses, refer to Section B – Losses of the General Reporting Requirements Section of this Plan 	03
Malicious Mischief and Vandalism	05
Cyclone, Earthquake, Explosion, Hail, Tornado, Water Damage and Windstorm	06
Flood and Rising Water	07
Towing and Labor Costs Refer to the Coverage Code Decision Table in Appendix A for reportable fields	08
All Other types – Other Than Collision	09

\star

COLLISION

Description	Code
Without Waiver of Deductible – Collision loss payment when deductible is applied Limited Collision with a deductible	10
With Waiver of Deductible – Collision loss payment when deductible is applied	11
With Waiver of Deductible – Collision loss payment when deductible is waived Limited Collision with full coverage	12
All Other types – Collision • (Mandatory for policies effective 1/1/09 and subsequent and optional for policies effective 4/1/08-12/31/08	09

*

Part VII - Statistical Data Quality Program

Section A - Statistical Data Quality Components

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

1. STATISTICAL SUBMISSIONS

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

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

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

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

a. Compliance For Newly Reporting Companies

If a company or company group exceeds the established private passenger reporting thresholds of \$100,000 in written premiums or \$50,000 in paid losses, as identified through the Annual Statement Reconciliation Process, statistical reporting to CAR must commence. Although the determination of whether a company exceeds the established thresholds is based upon the writings of an affiliated company group, statistical data must be reported to CAR on an individual company basis. Companies identified as exceeding the reporting thresholds will be required to report detailed statistical data no later than the December shipment of the second following year.

★ Example

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

Part VII - Statistical Data Quality Program

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (continued)

b. Low Volume Company

 \star

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

c. Due Date

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

d. Turnaround Time Commitment

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

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

Part VII - Statistical Data Quality Program

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (continued)

e. Acceptable Shipments

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

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

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

f. Limits In Excess (LEX) Records

Any record with an extremely high exposure, premium dollar amount, or loss dollar amount (according to the chart below) will be identified for CAR Staff to review. Note that for the premium dollar tolerances, bodily injury and property damage premium amounts are checked separately for liability records and collision and other than collision premium amounts are checked separately for physical damage records. Also, note that Commuter Discount records are excluded from the relevant exposure checks.

LEX Tolerance Levels		
Field Tolerance		
Exposure	-120 to +120 exposures	
Premium Dollar Amount -\$10,000 to +\$10,000		
Loss Dollar Amount -\$500,000 to +\$500,000		

Part VII - Statistical Data Quality Program

Section A - Statistical Data Quality Components

1. STATISTICAL SUBMISSIONS (continued)

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

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

2. STATISTICAL ERRORS

a. Due Date

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

b. Acceptability

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

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

c. Low Volume

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

Part VII - Statistical Data Quality Program

Section A - Statistical Data Quality Components

2. STATISTICAL ERRORS (continued)

c. Low Volume (Continued)

Statistical Error Tolerance Levels			
Private Passenger Total Number O Error Records		Total Exposures or Loss Dollars In Error	
Liability, No-Fault and Physical Damage Premiums	1 to 25	-60 to +60 exposures	
Liability Losses	1 to 20	-\$5,000 to +\$5,000 losses	
No-Fault Losses	1 to 20	-\$2,000 to +\$2,000 losses	
Physical Damage Losses	1 to 20	-\$2,000 to +\$2,000 losses	



★ 3. <u>MASSACHUSETTS ANNUAL STATEMENT</u>

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

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

Part VII - Statistical Data Quality Program

<u>Section B – Statistical Data Quality Penalties</u>

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

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

1. STATISTICAL SUBMISSIONS

 \star

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

a. Compliance for Newly Reporting Companies

Companies that fail to report statistical submissions to CAR, after being identified as exceeding the established private passenger reporting thresholds for written premiums and/or paid losses, will be assessed a \$12,500 Statistical Data Quality Penalty the first calendar year. If non-compliance continues, a \$30,000 penalty will be assessed after the second calendar year, and a \$60,000 penalty will be assessed each calendar year thereafter until statistical data reporting begins. Although the determination of whether a company exceeds the established thresholds is based upon the writings of the entire group, this penalty will be assessed on an individual company basis. It will be applied to each company within the identified group, regardless of whether the company on an individual basis has exceeded the reporting thresholds. In addition, the Division of Insurance will be notified of the company's non-compliance.

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

Part VII - Statistical Data Quality Program

Section B – Statistical Data Quality Penalties

1. STATISTICAL SUBMISSIONS (Continued)

b. Low Volume Company

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

c. Late And Unacceptable Shipments

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

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

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

Part VII - Statistical Data Quality Program

Section B – Statistical Data Quality Penalties

2. STATISTICAL ERRORS

 \star

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

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

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

Part VII - Statistical Data Quality Program

Section B – Statistical Data Quality Penalties

★ 3. MASSACHUSETTS ANNUAL STATEMENT AND QUARTERLY STATUTORY PAGE 14 FOR MASSACHUSETTS

- A Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for the late submission of Fourth Quarter NAIC Annual Statement filings and corresponding copy of the Massachusetts Annual Statement. Also, a Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for a late Fourth Quarter Massachusetts Annual Statement Reconciliation response until CAR receives the response.
- A Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for the late submission of quarterly Statutory Page 14 data for Massachusetts. Also, a Statistical Data Quality Penalty of \$100 per CAR business day will be assessed for a late response to the reconciliation of the quarterly Statutory Page 14 for Massachusetts until CAR receives the response.
 - Since each company that is affiliated with a group is required to report its statistical data on an individual company number level and is required to report separate Massachusetts Annual Statement data and quarterly Statutory Page 14 for Massachusetts data, the Annual Statement penalties will also be assessed on an individual company basis.

★ 4. DISPUTED PENALTY FEES

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

PRIVATE PASSENGER RECORD LAYOUT MODIFICATION KEY

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

No.	Valid Policy Effective Date(s)	Field	Annual Statement Line of Business Codes	Reporting Position
1)	1989 through 1995	Intensified Appraisal ID Code	21.1	47
	1996 and subsequent	Reserved for Future Use	Losses	47
2	1991 and subsequent	Producer Code	All	61 – 66
3	1995 and prior	Model Year Code	21.1	43 – 44
	4005	ZIP Code	All	72 – 80
4	1995 and subsequent	Vehicle Identification Number	All	131 – 147
(5)	1996 and subsequent	Model Year Code	All	51 – 52
6	2001 and subsequent	OEM Coverage Code	21.1	56
7	2001 and subsequent Optional 1/1/1999-12/31/2000	Model Year Century Code	All	36
8	2001 and subsequent	Property Damage Limit Code	19.2	39 – 40
9	2000 and prior	1 Toperty Damage Limit Code	19.2	40
9	2002 and prior	Class Group Code	All	54
9	2003 and subsequent	Reserved for Future Use	7 (1)	J4
10	2002 and prior	Claim Count	All Losses	90
•	2003 and subsequent	Reserved for Future Use	7 111 200000	
11)	2002 and prior	Estimated Annual Mileage Code	All	48-50
	2003 and subsequent 1996 – 2008	Annual Mileage Code Rate Departure Factor Code		
12	2009 and subsequent	Reserved for Future Use	All Premiums	88 - 90
	2009 and prior	Accident Town Code		
13	2010 and subsequent	Reserved for Future Use	- All Losses	40 - 42
	2009 and prior	Pre-Insurance Inspection ID Code	21.1	
14)	2010 and subsequent	Reserved for Future Use	Premiums	47
15	2010 and subsequent 2011 and subsequent Optional 4/1/2010-12/31/2010	Continuous Coverage Discount Code	19.1, 19.2	58
16	2011 and subsequent Optional 4/1/2010-12/31/2010	Low Frequency Discount Code	19.1, 19.2	59
17)	2010 and prior	Symbol Code	21.1	45-46
$\overline{\psi}$	2011 and subsequent	Reserved for Future Use	21.1	43-40



LIABILITY PREMIUM

1	COMPANY OR		
2	GROUP NUMBER CODE		
3			
4	TRANSACTION TYPE CODE		
5			
6	ACCOUNTING	Month	
7	DATE	Year	
8	POLICY	Month	
9	EFFECTIVE	Veer	
	DATE	Year Year	
10			
11	TRANSACTION	Month	
12	EFFECTIVE	Year	
13	DATE	Year	
14	POLICY	Month	
15	EXPIRATION DATE	Year Year	
16	DATE	ा स्था	
17	STATE CODE		
19			
20	TERRITORY		
21	CODE		
22	CAR IDENTIFICATION	CODE	
23	TYPE OF RISK COI		
24			
25	ANNUAL STATEMENT		
26	LINE OF BUSINESS CODE		
27			
28	SUBLINE CODE		
29			
30			
31	01.40015-2		
32	CLASSIFICATION		
33	CODE		
34			
35			
36	MODEL YEAR CENTURY C	ODE 7	
37	BODILY INJURY		
38	LIMITS CODE	WT 0655	
39	PROPERTY DAMAGE LIM	IIT CODE	
40	8		
41	MEDICAL PAYMENTS		
42	LIMIT CODE		
43	BODILY INJURY CAUSEI UNINSURED AUTO LIMIT		
44			
45	BODILY INJURY CAUSED BY AN UNDERINSURED AUTO LIMITS CODE		
46			
48	Reserved for Future Use		
49	ANNUAL MILEAGE 11)		
50	CODE		

51	MODEL YEAR CODE (5)	
52	WODEL YEAR CODE (9)	
53	Reserved for Future Use	
54	9	
55	· ·	
56	PASSIVE RESTRAINT DISC. CODE	
57	DISCOUNT CODE	
58 ★	CONTINUOUS COV. DISC. CODE®	
59 ★	LOW FREQUENCY DISC. CODE®	
60	Reserved for Future Use	
61		
62	PRODUCER CODE	
63	PRODUCER CODE	
64	2	
65		
66		
67		
68		
69	Reserved for Future Use	
70		
71		
72		
73		
74	ZIP CODE	
75		
76		
77	4	
78		
79		
80		
81		
82		
83		
84	EVENOUEE	
85	EXPOSURE	
86		
87		
88		
89	D	
90	Reserved for Future Use (12)	
91		
92		
93	Reserved for Future Use	
94		
95		
96		
97		
98	BODILY INJURY	
99	PREMIUM	
100		
100		

101	DODII VIN II IDV
102	BODILY INJURY
103	PREMIUM (Continued)
104	
105	
106	
107	
108	PROPERTY DAMAGE
109	PREMIUM
110	
111	
112	
113	Reserved for
114	Future Use
115	
116	
117	
118	
119	
120	
120	
121	POLICY
	IDENTIFICATION
123 124	NUMBER
125	
126	
127	
128	
129	
130	
131	
132	
133	
134 135	
136	
137	VEHICLE
138	IDENTIFICATION
139	NUMBER
140	4
141	
142	
144	
145	
146	
147	
148	COMPANYLICE
149	COMPANY USE

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

LIABILITY LOSS

		1	
1	COMPANY OR		
2	GROUP NUMBER C	ODE	
3			
5	TRANSACTION TYPE CODE		
6	ACCOUNTING	Month	
7	DATE	Year	
8	2,112	roai	
	POLICY EFFECTIVE DATE	Month	
9		Year	
10	5/112	Year	
11		Month	
12	ACCIDENT	Day	
13	ACCIDENT	Day	
14	DATE	Year	
15		Year	
16	Reserved for Future	Use	
17			
18	STATE CODE		
19			
20	TERRITORY CODE		
21			
22	CAR IDENTIFICATION CODE		
23	TYPE OF RISK CODE		
24			
25	ANNUAL STATEMENT LINE OF BUSINESS CODE		
26			
27			
28	SUBLINE CODE		
29	SUBLINE CODE		
30			
31	CLASSIFICATION CODE		
32			
33			
34			
35			
36	MODEL YEAR CENTURY (:ODF (7)	
37			
38	LIABILITY LIMITS CO	DDE	
39	Reserved for Future	Use	
40			
41	Reserved for Future Us	_ 13)	
42	i veserved for i didite OS		
43			
44			
45	Reserved for Future	Use	
46	1 tood vou for i uture		
47			
48			
49	ANNUAL MILEAGE 11)		
50	CODE		
- 50			

51	MODEL VEAD OF	DDE (E)	
52	MODEL YEAR CODE (5)		
53			
54	Reserved for Future Use 9		
55	PARTIAL/TOTAL LOSS INDICATOR		
56	PASSIVE RESTRAINT DIS	SC. CODE	
57	DISCOUNT COD	E	
58 ★	CONTINUOUS COV. DISC	. CODE 15	
59 ★	LOW FREQUENCY DISC.	CODE 16	
60	Reserved for Future	Use	
61			
62			
63	PRODUCER COD)E	
64	2		
65	٧		
66			
67	Reserved for Future Use		
68			
69			
70			
71			
72			
73	ZIP CODE ④		
74			
75			
76			
77			
78			
79			
80			
81	Reserved for Future	Use	
82	DEDODTING	Month	
83	REPORTING	Year	
84	DATE	Year	
85			
86	Reserved for Future	Use	
87	TYPE OF LOSS CO)DE	
88	111 2 01 2003 00	,DE	
89		^	
90	Reserved for Future I	Jse 10	
91			
92			
93			
94	LOSS AMOUNT	•	
95	LOSS AWOUNT		
96			
97			
98			
99	CLAIM IDENTIFICAT	TON	
100	NUMBER		
. 50	NOWDER		

101	
102	
103	
104	
105	
106	
107	CLAIM
108	IDENTIFICATION
109	NUMBER (Continued)
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	POLICY
122	IDENTIFICATION
123	NUMBER
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	VEHICLE
137	IDENTIFICATION
138	NUMBER
139	
140	4
141	
142	
143	
144	
145	
146	
147	
148	COMPANYLICE
149 150	COMPANY USE
1:00	

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

NO-FAULT PREMIUM

1	COMPANY OR	
2	GROUP NUMBER CO	ODE
3		
4	TRANSACTION TYPE CODE	
5		
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY	Month
9	EFFECTIVE	Year
	DATE	Year
10		
11	TRANSACTION	Month
12	EFFECTIVE	Year
13	DATE	Year
14	POLICY EXPIRATION	Month
15	DATE	Year Year
16 17	DAIL	ı eai
18	STATE CODE	
19		
20	TERRITORY CODE	
21	TERMITORI GODE	
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24		
25	ANNUAL STATEMENT	
26	LINE OF BUSINESS CODE	
27		
28	SUBLINE CODE	
29		
30		
31		
32	CLASSIFICATION	1
33	CODE	
34		
35		
36	MODEL YEAR CENTURY O	ODE ⑦
37	PIP COVERAGE CC	DE
38	DID DEDI ICTIDI E CO)DE
39	PIP DEDUCTIBLE CO	JUE
40		
41		
42		
43	Reserved for Future I	Jse
44	. 1.000. Fou for 1 didire	
45		
46		
47		
48	ANNUAL MILEAGE (1)	
49		
50	CODE	

F.4	Г		
51	MODEL YEAR CODE ⑤		
52			
53 54	Reserved for Future Use 9		
55	Reserved for Future Use (9)		
56	PASSIVE RESTRAINT DISC. CODE		
57	DISCOUNT CODE		
58	_		
30	CONTINUOUS COV DISC. CODE (5)		
59	LOW FREQUENCY DISC. CODE ®		
60	Reserved for Future Use		
61			
62	DDODLICED CODE		
63	PRODUCER CODE		
64	2		
65			
66			
67			
68			
69	Reserved for Future Use		
70			
71			
72			
73			
74			
75	ZIP CODE ④		
76			
77			
78			
79			
80			
81			
82			
83			
84	EXPOSURE		
85			
86			
87			
88			
89	Reserved for Future Use (2)		
90			
91			
92			
93	Reserved for Future Use		
94			
95			
96			
97	PIP (NO-FAULT) PREMIUM		
98			
99			
100			

101	DID (NO EALILT)		
102	PIP (NO-FAULT)		
103	PREMIUM (Continued)		
104			
105			
106			
107			
108			
109	Reserved for Future Use		
110			
111			
112			
113			
114			
115			
116			
117			
118			
119			
120			
121			
122	POLICY IDENTIFICATION NUMBER		
123			
124			
125			
126			
127			
128			
129			
130			
131			
132			
133			
134			
135			
136			
137	VEHICLE		
138	IDENTIFICATION		
139	NUMBER		
140	4		
141			
142			
143			
144			
145			
146			
147			
148			
149	COMPANY USE		
	i		

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

NO-FAULT LOSS

1	COMPANY OR	
2	GROUP NUMBER CODE	
3		
4	TRANSACTION TYPE CODE	
5	-	
6	ACCOUNTING	Month
7	DATE	Year
8	POLICY	Month
9	EFFECTIVE	Year
	DATE	Year
10		
11		Month
12	ACCIDENT	Day
13	DATE	Day
14		Year
15		Year
16	Reserved for Future	Use
17	STATE CODE	
18		
19	TERRITORY COR	_
20	TERRITORY CODE	
21		
22	CAR IDENTIFICATION CODE	
23	TYPE OF RISK CODE	
24	ANNUAL STATEMENT	
25 26	LINE OF BUSINESS CODE	
27		
28	SLIBLINE CODE	
29	SUBLINE CODE	
30		
31	CLASSIFICATION CODE	
32		
33		
34		
35		
36	MODEL YEAR CENTURY (CODE ⑦
37	PIP COVERAGE CO	DDE
38		
39	PIP DEDUCTIBLE CO	JUE
40	Reserved for Future	Use
41	@	
42	(3)	
43		
44		
45	Reserved for Future	Use
46		
47		
48	ANNUAL MILEAGE (1)	
49		
50	CODE	

101		
102		
103		
104		
105		
106		
107	CLAIM	
108	IDENTIFICATION	
109	NUMBER (Continued)	
110		
111		
112		
113		
114		
115		
116		
117		
118		
119		
120		
121		
122	POLICY	
123	IDENTIFICATION	
124	NUMBER	
125		
126		
127		
128		
129		
130		
131		
132		
133		
134		
135		
136		
137	VEHICLE	
138	IDENTIFICATION	
139	NUMBER	
140	4	
141		
142		
143		
144		
145		
146		
147		
148		
149	COMPANY USE	
150		

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

Last Revision Date: 04/01/2010 **Page: VIII:5** Print Date: 02/23/2010

PHYSICAL DAMAGE PREMIUM

1	COMPANY OR		
2	GROUP NUMBER CO	ODF	
3	GROOF NOWBER CODE		
4	TRANSACTION TYPE	CODE	
5	TRANSACTION TIPE CODE		
6	ACCOUNTING	Month	
7	DATE	Year	
8	POLICY	Month	
9	EFFECTIVE	Year	
10	DATE	Year	
11	TRANSACTION	Month	
12	EFFECTIVE	Year	
13	DATE	Year	
14	POLICY	Month	
15	EXPIRATION	Year	
16	DATE	Year	
17	STATE CODE		
18	32 0002		
19			
20	TERRITORY CODE		
21			
22	CAR IDENTIFICATION CODE		
23	TYPE OF RISK CODE		
24	ANNUAL STATEMENT		
25	LINE OF BUSINESS CODE		
26	LINE OF DOUBLINESS CODE		
27	SUBLINE CODE		
28			
29			
30	CLASSIEICATION		
31			
32	CLASSIFICATION	١	
33	CODE		
34			
35			
36	MODEL YEAR CENTURY C	ODE 7	
37	OTHER THAN COLUM	CION	
38	OTHER THAN COLLI COVERAGE COD		
39	SSVEIVIGE GOD	_	
40	COLLIGION		
41	COLLISION COVERAGE COD	F	
42	OOVLINAGE COD		
43	Decembed for Fitting 11	. @	
44	Reserved for Future Use	• ③	
45	Reserved for Future Us	se (17)	
46	Neserved for Future Os		
47	Reserved for Future Use	e (14)	
48	ANINII IAI MII EACE	(11)	
49	ANNUAL MILEAGE	: W	
50	CODE		

51	MODEL YEAR CODE (5)
52	WODEL TEAK CODE
53	ANTI-THEFT DEVICE DISC. CODE
54	Reserved for Future Use 9
55	Reserved for Future Ose
56	OEM COVERAGE CODE 6
57	DISCOUNT CODE
58	
59	VALUE CODE
60	
61	
62	DROUTCED CODE
63	PRODUCER CODE
64	2
65	
66	
67	HIGH-THEFT VEHICLE CODE
68	Reserved for Future Use
69	EXTRA-RISK RATING CODE - OTO
70	Reserved for Future Use
71	EXTRA-RISK RATING CODE - COL
72	
73	
74	1
75	ZIP CODE
76	
77	4
78	1
79	1
80	1
80	
80 81	
80 81 82	EXDOGLIDE
80 81 82 83	EXPOSURE
80 81 82 83 84	EXPOSURE
80 81 82 83 84 85	EXPOSURE
80 81 82 83 84 85	EXPOSURE
80 81 82 83 84 85 86	
80 81 82 83 84 85 86 87	EXPOSURE Reserved For Future Use ②
80 81 82 83 84 85 86 87 88	
80 81 82 83 84 85 86 87 88 89	
80 81 82 83 84 85 86 87 88 89 90	
80 81 82 83 84 85 86 87 88 89 90	Reserved For Future Use ②
80 81 82 83 84 85 86 87 88 89 90 91 92 93	Reserved For Future Use ②
80 81 82 83 84 85 86 87 88 89 90 91 92 93 94	Reserved For Future Use ②
80 81 82 83 84 85 86 87 88 89 90 91 92 93	Reserved For Future Use ②
80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95	Reserved For Future Use ②
80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95	Reserved For Future Use ② Reserved for Future Use
80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95	Reserved For Future Use ② Reserved for Future Use OTHER THAN

IUM	
101	OTHER THAN
102	COLLISION PREMIUM
103	(Continued)
104	
105	
106	
	COLLISION
107	PREMIUM
108	
110	
111	
112	
113	Reserved for
114	Future Use
115	
116	
117	
118	
119	
120	
121	DOLLOV.
122	POLICY IDENTIFICATION
123	NUMBER
124	Nomber
125	
126	
127	
128	
129	
130	
131	
132	
133	
134 135	
133	
136	
137	VEHICLE
138	IDENTIFICATION
139	NUMBER
140	
141	4
142	
143	
144	
145	
146	
147	
148	
149	COMPANY USE

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

PHYSICAL DAMAGE LOSS

1	COMPANY OR							
2	GROUP NUMBER CODE							
3								
4	TRANSACTION TYPE CODE							
5	Month							
6	ACCOUNTING DATE							
7	POLIOV.	Year						
8	POLICY	Month						
9	EFFECTIVE DATE	Year						
10	DATE	Year						
11		Month						
12	ACCIDENT	Day						
13	DATE	Day						
14		Year						
15		Year						
16	Reserved for Future	Use						
17	STATE CODE							
18								
19	TERRITORY CODE							
20	TERRITORY CODE							
21								
22	CAR IDENTIFICATION							
23	TYPE OF RISK CO	DE						
24	ANNUAL STATEME	:NT						
25	LINE OF BUSINESS O							
26								
27	0.10.11.							
28	SUBLINE CODE							
29								
30								
31								
32	CLASSIFICATION	١						
33	CODE							
34								
35								
36	MODEL YEAR CENTURY (CODE ⑦						
37								
38	COVERAGE COD	E						
39								
40								
41	Reserved for Future Us	ie 13						
42								
43								
44	Reserved for Future Us	e ③						
45	A Popping of for Figure 11	no 170						
46	Reserved for Future Us	se w						
47	Reserved for Future Use	e ①						
48	ANNUAL MILEAGE	<u>(11)</u>						
49		- w						
50	CODE							

51	
52	MODEL YEAR CODE (5)
53	ANTI-THEFT DEVICE DISC. CODE
54	Reserved for Future Use 9
55	PARTIAL/TOTAL LOSS INDICATOR
56	OEM COVERAGE CODE ⑥
57	DISCOUNT CODE
58	
59	VALUE CODE
60	
61	
62	PRODUCER CODE
63	
64	2
65	-
66	HIGH THEET VEHICLE CODE
67	HIGH-THEFT VEHICLE CODE
68	Reserved for Future Use EXTRA-RISK RATING CODE – OTC
69 70	
70	Reserved for Future Use EXTRA-RISK RATING CODE – COLL.
72	EXTRA-RISK RATING CODE - COLL.
73	-
74	+
75	ZIP CODE
76	_
77	4
78	
79	
80	1
81	
82	Reserved for Future Use
83	Neserved for radiale ose
84	
85	047407000000000
86	CATASTROPHE CODE
87	TYPE OF LOSS CODE
88	2 3. 2000 0052
89	Reserved for Future Use (10)
90	Reserved for Future Use (10)
91	
92	
93	
94	
95	LOSS AMOUNT
96	
97	
98	
99	CLAIM IDENTIFICATION
100	NUMBER

5	
101	
102	
103	
104	
105	
106	CLAIM
107	IDENTIFICATION
108	NUMBER (Continued)
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	POLICY
122	IDENTIFICATION
123	NUMBER
124	
125	
126	
127	
128	
129 130	
131	
132	
133	
134	
135	
136	
137	VEHICLE
138	IDENTIFICATION
139	NUMBER
140	4
141	
142	
143	
144	
145 146	
140	
147	
148	
149	COMPANY USE
150	

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

A

Accident Date, V:1–V:2, V:7–V:8, V:13–V:14
Accident Reporting, III:8
Accounting Date, IV:1, IV:7, IV:13, V:1, V:7, V:13
Adjustments, II:4
Allocated Loss Adjustment Expenses (ALAE), III:9–III:10
Annual Mileage Code, IV:3, IV:9, IV:15, V:3, V:9, V:15, VI:17
Annual Statement Line of Business Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:7
Anti-Theft Device Discount Code, IV:15, V:16, VI:44

C

CAR Identification Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:3-5 Catastrophe Code, V:18 Claim Definition, III:6 Claim Identification Number, V:6, V:11–V:12, V:18-19, VI:29 reporting of, III:8 Classification Code, IV:3, IV:9, IV:15, V:3, V:9, assignment of statistical classification, VI:9 Miscellaneous Rated As Private Passenger, Non-Owned Automobiles, VI:15 Private Passenger, VI:10-VI:11 Private Passenger Motorcycles, VI:13 - VI:14 Special Rating and Adjustment, VI:15 Collision Coverage Code, IV:15, VI:40 Companies in a Run-Off Position, II:2 Company (Group) Number Code, IV:1, IV:7, IV:13, V:1, V:7, V:13 Continuous Coverage Discount, IV:4, IV:10, V:4, V:10, VI:23 Coverage Code, V:15

D

Data Reporting Requirements, II:2–II:4 alphanumeric/numeric coding, II:3 consolidated shipment reporting, II:3 monthly/quarterly submissions, II:3 reporting of spaces, II:3

D (continued)

Decision Tables
Table of Required Fields, A:1
Classification Code Decision Table, A:2
Coverage Code Decision Table, A:3
Discount Code, IV:4, IV:10, IV:16, V:4, V:10, V:16, VI:22

\mathbf{E}

Effective Date of the Plan, I:2
Endorsements
reporting changes in coverage, III:2–III:3
as of policy effective date, III:2
subsequent to policy effective date, III:2
Exposure, IV:5, IV:10, IV:17, VI:27
reporting of exposure, III:2
Extent of Vehicle Loss. See Partial/Total Loss Indicator
Extra-Risk Rating, III:4, III:13
Extra-Risk Rating Code, V:17
Collision, IV:17, V:17, VI:48
Other Than Collision, IV:16, V:17, VI:47

G

Glass Losses, III:13

H

High-Theft Vehicle Code, IV:16, V:17, VI:46

Ι

Installment Policies, III:5 Intensified Appraisal Identification Code, VI:43 Intercompany Reimbursement of PIP Claims, III:10–III:11 Intracompany Reimbursement of PIP Claims, III:11

L P (continued) Liability Limits Codes, IV:3, VI:32 Passive Restraint Device Discount Code, IV:4, BI Caused by an Underinsured Auto Limits IV:10, V:4, V:10, VI:21 Code, IV:3 PIP Coverage Code, IV:9, V:9, VI:34 BI Caused by an Uninsured Auto Limits Code, PIP Deductible Code, IV:9, V:9, VI:35 IV:3 Policies Ceded to Commonwealth Automobile Liability Limits Codes Reinsurers Prior to 4/1/09, II:4 Bodily Injury Limit Code, IV:3 Policy Effective Date, IV:1, IV:7, IV:13, V:1, V:7, Liability Limits Code (Losses), V:3 V:13 Medical Payments Limit Code, IV:3 Policy Expiration Date, IV:2, IV:8, IV:14 Property Damage Limit Code, IV:3 Policy Extension, III:5 Limits in Excess (LEX) Records, VII:3 Policy Identification Number, IV:6, IV:11, IV:18, Loss Amount, V:6, V:11, V:18 V:6, V:12, V:19, VI:30 Loss Requirements, III:6-III:13 Pre-Insurance Inspection Identification Code, VI:42 reporting of losses, III:6 **Premium Amounts** Low Frequency Discount, IV:4, IV:10, V:4, V:10, Bodily Injury Premium Amount, IV:5 VI:24 Collision Premium Amount, IV:18 Low Volume Companies, II:1, VII:2 Other Than Collision Premium Amount, IV:17 eligibility, II:1 PIP (No-Fault) Premium Amount, IV:11 non-compliance penalties, VII:8 Property Damage Premium Amount, IV:6 Premium Requirements, III:1-III:5 \mathbf{M} premium cancellation, III:3-III:4 Merit Rating Plan, III:1, III:13 flat cancellation, III:3 Model Year Century Code, IV:3, IV:9, IV:15, V:3, pro rata cancellation, III:3 V:9, V:15, VI:16 short rate cancellation, III:4 Model Year Code, IV:4, IV:9, IV:15, V:4, V:9, reporting of premiums, III:1 V:16, VI:16 Producer Code, IV:4, IV:10, IV:16, V:4, V:10, Multiple Year Policies, III:5 V:17, VI:25 N R Newly Reporting Companies, II:1, VII:1 Rate Departure Factor Code, VI:28 Nil Submission, II:1, VII:2 Rate Deviations, III:5 associated penalties, VII:7 Rate Edit appeal process, VII:5 0 associated penalties, VII:9 error tolerances, VII:5 OEM Coverage Code, III:1, IV:16, V:16, VI:45 penalty reduction, VII:9 Other Than Collision Coverage Code, IV:15, VI:38 miscellaneous coverages, VI:39 Outstanding Losses, III:13

P

VI:20

Partial/Total Loss Indicator, III:13, V:4, V:16,

T **R** (continued) Territory Codes, B:1-B:14 Alphabetical Listing, B:1-7 Record Layout Modification Key, VIII:1 Numerical Listing, B:8-14 Record Layouts Traffic Law Violations, C:1-C:8 Liability Loss, VIII:3 Transaction Effective Date, IV:1, IV:7, IV:13 Liability Premium, VIII:2 Transaction Type Code, IV:1, IV:7, IV:13, V:1, No-Fault Loss, VIII:5 V:7, V:13, VI:1 No-Fault Premium, VIII:4 Turnaround Time Commitment, VII:2 Physical Damage Loss, VIII:7 Type of Claimant Code, V:10, VI:36 Physical Damage Premium, VIII:6 Type of Loss Code, V:5, V:11, V:18 Reinsurance, II:4 liability, VI:33 Reporting Date, V:5 physical damage Reporting Thresholds, II:1, VII:1 collision, VI:49 non-compliance penalties, VII:7 other than collision, VI:49 PIP (no-fault), VI:37 S Type of Risk Code, IV:2, IV:8, IV:14, V:2, V:8, Salvage Recoveries/Expenses, III:12 V:14, VI:6 Shipment Due Dates, VII:2 State Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:2 U Statistical Data Quality Program Unallocated Loss Adjustment Expenses, III:10 Components, VII:1-VII:5 Updates to the Plan, I:2 Penalties, VII:6-VII:9 Statistical Error Listings \mathbf{V} acceptability, VII:4 due dates, VII:4 Value Code, V:16, VI:41 insufficient volume of corrections applied, VII:9 Vehicle Identification Number, IV:6, IV:12, IV:18, late return of corrections, VII:9 V:6, V:12, V:19, VI:31 low volume, VII:4-VII:5 VIN. See Vehicle Identification Number **Statistical Submissions** acceptability criteria, VII:3 \mathbf{Z} late and unacceptable shipments, VII:8 company responsibilities, VII:1 ZIP Code, IV:5, IV:10, IV:17, V:5, V:11, V:17, Statutory Page 14 for Massachusetts, II:2 VI:26 non-compliance penalties, VII:10 reconciliation of, II:2, VII:6 Subline Code, IV:2, IV:8, IV:14, V:2, V:8, V:14, VI:8 Subrogation Recoveries/Expenses, III:12 allocated loss adjustment expense recoveries,

indemnity recoveries, III:11–III:12

Appendix A - Classification and Coverage Code Decision Tables

TABLES OF REQUIRED PRIVATE PASSENGER FIELDS

The fields identified below are required to be reported on all private passenger statistical records and are therefore not listed in the Decision Tables contained on the following pages. For all other fields not noted below, refer to the Classification Code and Coverage Code Decision Tables to determine which fields are required to be reported.

A value of "Y" in the Classification Code and Coverage Code Decision Tables indicates that the field is required to be reported. A value of "N" indicates that the field is not required to be reported. A value of "O" indicates that the field is not required to be reported, but the company may optionally report data in that field. Note that if data is reported in an optional field, it will be verified for accuracy.

Fields Common to All Records

Accounting Date

Annual Statement Line of Business Code

CAR Identification Code

PIP Coverage Code (No-Fault)

PIP Deductible Code (No-Fault)

Policy Effective Date

Policy Identification Code

State Code

Transaction Type Code

Fields Common to Premium Records Only

Policy Expiration Date

Premium Amounts

Transaction Effective Date

Fields Common to Loss Records Only

Accident Date

Catastrophe Code (Physical Damage)

Claim Identification Number

Loss Amount

Reporting Date (Liability)

Type of Claimant Code (No-Fault)

Type of Loss Code



Appendix A - Classification and Coverage Code Decision Tables

CLASSIFICATION CODE DECISION TABLE

																	₩					
Classification Code	Anti-Theft Device Discount	Coverage Code (Phys. Dam.)	Continuous Cov. Discount	Discount Code	Annual Mileage Code	Exposure	Extra-Risk Rating Codes	High-Theft Vehicle Code	Limits Codes (Liability)	Low Frequency Discount	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Passive Restraint Device	Territory Code ode	Type of Risk Code	Value Code	Vehicle Identification	ZIP Code	Producer Code	Subline
###1## 10	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###2## 15	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###3## 17	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###4## 18	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###5## 30	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###6## 20	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###7## 21	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###8## 25	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
###9## 26	0	Υ	Υ	Υ	0	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	0	Υ	Υ	N	Υ	Υ	0	0
0400##	N	Υ	N	N	N	Υ	Υ	Υ	Υ	N	N	N	0	0	N	Υ	Υ	N	Υ	Υ	0	0
0408##, 0409## 041### 0420## - 0425## 0427## - 0429## 043###, 0508## 0509##, 051### 052###, 0530## 0531##, 0608## 0609##, 061###	0	Υ	N	Υ	N	Υ	Υ	Υ	Υ	N	Υ	Υ	N	0	N	Υ	Υ	Υ	Υ	Υ	0	0
042600	Ν	Υ	N	N	N	Υ	Υ	Υ	Υ	N	N	N	N	N	N	Υ	Υ	N	N	Υ	0	0
0453##	N	Υ	N	N	N	Υ	Υ	Υ	N	N	N	N	N	N	N	Υ	Υ	N	Υ	Υ	0	0
0455##	N	Υ	N	N	N	Υ	Υ	Υ	Υ	N	Υ	Υ	N	0	N	Υ	Υ	N	Υ	Υ	0	0
0459##	N	Υ	N	N	N	Υ	Υ	Υ	N	N	N	N	N	N	N	Υ	Υ	N	Υ	Υ	0	0
0460##	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	Υ	0	0	N	Υ	Υ	N	Υ	Υ	0	0
048300	N	Υ	N	N	N	Υ	Υ	Υ	Υ	N	N	N	N	0	N	Υ	Υ	N	Υ	Υ	0	0
049500	N	Υ	N	N	N	Υ	Υ	Υ	Υ	N	N	N	N	N	N	Υ	Υ	N	N	Υ	0	0
0539##	0	Y	N	N	N	Y	Y	Y	Y	N	Y	Y	0	0	0	Y	Y	N	Y	Y	0	0
190000	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	0	0
700000	N	Υ	N	N	N	N	N	N	Υ	N	N	N	N	N	N	N	Υ	N	N	N	0	0
800000	N	Y	N	N	N	N	N	N	Υ	N	N	N	N	N	N	N	Υ	N	N	N	0	0
902000	N	Y	N	N	N	N	N	N	Y	N	N	N	N	N	N	N	Υ	N	N	N	0	0
998000	N	Υ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	Υ	N	N	N	0	0

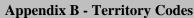
Appendix A - Classification and Coverage Code Decision Tables

COVERAGE CODE DECISION TABLE

- For all shaded areas, refer to the Classification Code Decision Table
- Applicable to Physical Damage records

Coverage Code	Anti-Theft Device Discount	Classification Code	Discount Code	Annual Mileage	Exposure	Extra-Risk Rating Code	High-Theft Vehicle Code	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Territory Code	Type of Risk	Value Code	Vehicle Identification Number	ZIP Code	Producer Code	Subline
056,057	N	Υ	N	N	N	N	N	N	N	N	N	N	Υ	N	N	N	0	0
060,063		Υ						N	N				Υ					
080 - 082	N	N	N	N	N	N	N	Z	N	N	N	N	Z	7	N	N	0	0
083-087	N	N	N	N	N	N	N	Ν	N	N	N	N	Ν	N	N	N	0	0
089	N	Υ	N	N	N	N	N	Ν	N	N	N	N	Ν	N	N	N	0	0
Other OTC Cov.		Υ											Υ					

Coverage Code	Anti-Theft Device Discount	Classification Code	Discount Code	Annual Mileage	Exposure	Extra Risk-Rating Code	High-Theft Vehicle Code	Model Year Century Code	Model Year Code	OEM Coverage Code	Partial/Total Loss Indicator	Territory Code	Type of Risk	Value Code	Vehicle Identification Number	ZIP Code	Producer Code	Subline
012-019	N	Υ											Υ					
041	N	Υ				Z		Z	Z				Υ					
040, 042- 049	N	Υ				N							Υ					
072-079	N	Υ											Υ					
092	N	Υ						N	Ν				Υ					
096,097	N	Υ	N	N	Ν	N	N	N	N	N	N	N	Υ	N	N	N	0	0
099	N	Υ	N	N	N	N	N	N	N	N	N	N	N	N	N	N	0	0



TERRITORY CODE

ALPHABETICAL LISTING

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

First Position	County	First Position	County
0	Barnstable	4	Franklin
	Dukes		Hampden
	Nantucket	5	Hampshire
	Plymouth	6	Middlesex
1	Berkshire	7	Norfolk
2	Bristol	8	Suffolk
3	Essex	9	Worcester

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

City of Boston									
Definition	ZIP Code	Statistical Code							
BOSTON CENTRAL	02101-02118, 02123, 02133, 02199, 02201, 02202, 02203, 02210, 02215, 02241	821							
BRIGHTON	02134, 02135, 02163	822							
CHARLESTOWN-EAST BOSTON	02128, 02129	824							
DORCHESTER	02122, 02124, 02125, 02126	819							
HYDE PARK	02136, 02137	818							
JAMAICA PLAIN	02130	817							
ROSLINDALE	02131	816							
ROXBURY	02119, 02120, 02121	820							
SOUTH BOSTON	02127	823							
WEST ROXBURY	02132	815							

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

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

Last Revision Date: 01/01/2010 Page: B:1 Print Date: 08/20/2009

Appendix	B	- Territory	Codes
----------	---	-------------	-------

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

Appendix B - Territory Codes

Code	Village or Local	City or Town	Code	Village or Local	City or Town
No	Designation	Name	No	Designation	Name
802	CHELSEA	CHELSEA		E	
944	Cherry Valley	LEICESTER	824	East Boston	CHARLESTOWN (Bos)
130 440	CHESHIRE CHESTER	CHESHIRE CHESTER	032	EAST BRIDGEWATER	EAST BRIDGEWATER
570	CHESTERFIELD	CHESTERFIELD	973	EAST BROOKFIELD	EAST BROOKFIELD
402	CHICOPEE	CHICOPEE	441	EAST LONGMEADOW	EAST LONGMEADOW
081	CHILMARK	CHILMARK	082	EASTHAM	EASTHAM
014	Chiltonville	PLYMOUTH	511	EASTHAMPTON	EASTHAMPTON
739	City Mills	NORFOLK	212	EASTON	EASTON
131	CLARKSBURG	CLARKSBURG	212	Eastondale	EASTON
178	Clayton	NEW MARLBOROUGH	053	EDGARTOWN	EDGARTOWN
021	Clement	BARNSTABLE	603	Edgeworth	MALDEN
200	Clifford	NEW BEDFORD	172	EGREMONT	EGREMONT
316	Clifton	MARBLEHEAD	044	Egypt	SCITUATE
321	Cliftondale	SAUGUS	712	Ellis	DEDHAM
911	CLINTON	CLINTON	431 032	Elmgrove Elmwood	COLRAIN EAST BRIDGEWATER
045	Cochessett	WEST BRIDGEWATER	712	Endicott	DEDHAM
649 732	COHASSET	WAYLAND	433	ERVING	ERVING
976	COHASSET Coldbrook Spring	COHASSET OAKHAM	330	ESSEX	ESSEX
650	Coldspring	WESTFORD	602	EVERETT	EVERETT
614	Collinsville	DRACUT	- 002		
431	COLRAIN	COLRAIN		F	
613	CONCORD	CONCORD	213	FAIRHAVEN	FAIRHAVEN
444	Congamond	SOUTHWICK	402	Fairview	CHICOPEE
473	CONWAY	CONWAY	201	FALL RIVER	FALL RIVER
480	Cooleyville	NEW SALEM	054	FALMOUTH	FALMOUTH
952	Cordaville	SOUTHBOROUGH	433	Farley	ERVING
021	Cotuit	BARNSTABLE	130	Farnhams	CHESHIRE
616	Cove Landing	HUDSON	913	Farnumsville	GRAFTON
021	Craigville	BARNSTABLE	603	Faulkner	MALDEN
021	Cummaquid	BARNSTABLE	952	Fayville	SOUTHBOROUGH
571	CUMMINGTON	CUMMINGTON	420	Feeding Hills	AGAWAM
342	Cushing	SALISBURY	621 712	Felchville Findlen	NATICK DEDHAM
510	Cushman	AMHERST	913	Fisherville	GRAFTON
084	Cuttyhunk	GOSNOLD	954	Fiskdale	STURBRIDGE
	D		902	FITCHBURG	FITCHBURG
132	DALTON	DALTON	201	Flint	FALL RIVER
313	DANVERS	DANVERS	512	Florence	NORTHAMPTON
313	Danversport	DANVERS	173	FLORIDA	FLORIDA
211	DARTMOUTH	DARTMOUTH	060	Forestdale	SANDWICH
481	Davis	ROWE	650	Forge Village	WESTFORD
712	DEDHAM	DEDHAM	734	FOXBOROUGH	FOXBOROUGH
432	DEERFIELD	DEERFIELD	615	FRAMINGHAM	FRAMINGHAM
476	Dell	HEATH	713	FRANKLIN	FRANKLIN
052	DENNIS	DENNIS	233	FREETOWN	FREETOWN
052	Dennisport	DENNIS	311	Frye Village	ANDOVER
232	DIGHTON	DIGHTON	939	Furnace	HARDWICK
936	Dodge	CHARLTON		G	
210	Dodgeville	ATTLEBORO	040		CARRAGE
819	DORCHESTER	DORCHESTER (Boston)	912 083	GARDNER GAY HEAD	GARDNER GAY HEAD
937	DOUGLAS	DOUGLAS	331	GEORGETOWN	GEORGETOWN
733	DOVER	DOVER	939	Gilbertville	HARDWICK
614	DRACUT	DRACUT	474	GILL	GILL
173	Drury DUDLEY	FLORIDA	644	Gleasondale	STOW
938 673	DUNSTABLE	DUDLEY DUNSTABLE	138	Glendale	STOCKBRIDGE
031	DUXBURY	DUXBURY	604	Glenwood	MEDFORD
530	Dwight	BELCHERTOWN	919	Globe Village	SOUTHBRIDGE
000	2 mgm	DELO: IEIX I OVVIA	314	GLOUCESTER	GLOUCESTER

Appendix B - Territory Codes

Code	Village or Local	City or Town	Code	Village or Local	City or Town
No	Designation	Name	No	Designation	Name
573	GOSHEN	GOSHEN	021		BARNSTABLE
084	GOSNOLD	GOSNOLD	021	Hyannis Hyannisport	BARNSTABLE
913	GRAFTON	GRAFTON	818	HYDE PARK	HYDE PARK (Boston)
574	GRANBY	GRANBY	010	IIIDE FARK	TITUE FARR (BOSTOII)
650	Graniteville	WESTFORD		I	
492	GRANVILLE	GRANVILLE	400	Indian Orchard	SPRINGFIELD
111	GREAT BARRINGTON	GREAT BARRINGTON	403	Ingleside	HOLYOKE
039	Green Harbor	MARSHFIELD	138	Interlaken	STOCKBRIDGE
044	Greenbush	SCITUATE	315	IPSWICH	IPSWICH
900	Greendale	WORCESTER	031	Island Creek	DUXBURY
410	GREENFIELD	GREENFIELD	742	Islington	WESTWOOD
624	Greenwood	WAKEFIELD		J	
112	Greylock	NORTH ADAMS			
431	Griswoldville	COLRAIN	817	JAMAICA PLAIN	JAMAICA PLAIN (Bos)
636	GROTON	GROTON	940	Jefferson	HOLDEN
332	GROVELAND	GROVELAND		K	
	Н		054		LWEGTON.
			651	Kendall Green	WESTON
531	HADLEY	HADLEY	036	KINGSTON	KINGSTON
070	HALIFAX	HALIFAX		L	
333	HAMILTON	HAMILTON	644	Lake Boon	STOW
493	HAMPDEN	HAMPDEN	411	Lake Pleasant	MONTAGUE
174	HANCOCK	HANCOCK	037	LAKEVILLE	LAKEVILLE
033	HANOVER	HANOVER	943	LANCASTER	LANCASTER
034	HANSON	HANSON	134	LANESBOROUGH	LANESBOROUGH
736	Harding	MEDFIELD	314	Lanesville	GLOUCESTER
939	HARDWICK	HARDWICK NEW MARLBOROUGH	512	Laurel Park	NORTHAMPTON
178 974	Hartsville HARVARD	HARVARD	303	LAWRENCE	LAWRENCE
055	HARWICH	HARWICH	135	LEE	LEE
055	Harwichport	HARWICH	512	Leeds	NORTHAMPTON
054	Hatchville	FALMOUTH	944	LEICESTER	LEICESTER
532	HATFIELD	HATFIELD	136	LENOX	LENOX
313	Hathorne	DANVERS	136	Lenoxdale	LENOX
302	HAVERHILL	HAVERHILL	914	LEOMINSTER	LEOMINSTER
475	HAWLEY	HAWLEY	477	LEVERETT	LEVERETT
638	Hayden Row	HOPKINTON	617	LEXINGTON	LEXINGTON
534	Haydenville	WILLIAMSBURG	478	LEYDEN	LEYDEN
476	HEATH	HEATH	639	LINCOLN	LINCOLN
210	Hebronville	ATTLEBORO	603	Linden	MALDEN
715	Highlandville	NEEDHAM	917	Linwood	NORTHBRIDGE
477	Hillsboro	LEVERETT	573	Lithia	GOSHEN
012	HINGHAM	HINGHAM	315	Little Neck	IPSWICH
133	HINSDALE	HINSDALE	640	LITTLETON	LITTLETON
735	HOLBROOK	HOLBROOK	484	Locks Village Long Plain	WENDELL
940	HOLDEN	HOLDEN	230 442	LONGMEADOW	ACUSHNET LONGMEADOW
494	HOLLAND	HOLLAND	054	Longview	FALMOUTH
637	HOLLISTON	HOLLISTON	953	Loring	STERLING
403	HOLYOKE	HOLYOKE	601	LOWELL	LOWELL
173	Hoosac Tunnel	FLORIDA	421	LUDLOW	LUDLOW
941	HOPEDALE	HOPEDALE	945	LUNENBURG	LUNENBURG
638	HOPKINTON	HOPKINTON	300	LYNN	LYNN
240 239	Horseneck Beach Hortonville	WESTPORT SWANSEA	334	LYNNFIELD	LYNNFIELD
111	Housatonic	GREAT BARRINGTON	431	Lyonsville	COLRAIN
942	HUBBARDSTON	HUBBARDSTON		. ,	-
616	HUDSON	HUDSON		М	
035	HULL	HULL	314	Magnolia	GLOUCESTER
033	Humarock	SCITUATE	603	MALDEN	MALDEN
533	HUNTINGTON	HUNTINGTON	955	Manchaug	SUTTON
135	Hurlburt	LEE	335	MANCHESTER	MANCHESTER

Appendix B - Territory Codes

Code No	Village or Local Designation	City or Town Name	Code No	Village or Local Designation	City or Town Name
930	Manns Crossing	ASHBURNHAM	338	NAHANT	NAHANT
014	Manomet	PLYMOUTH	035	Nantasket Beach	HULL
214	MANSFIELD	MANSFIELD	056	NANTUCKET	NANTUCKET
110	Maple Grove	ADAMS	650	Nashoba	WESTFORD
603	Maplewood	MALDEN	621	NATICK	NATICK
316	MARBLEHEAD	MARBLEHEAD	715	NEEDHAM	NEEDHAM
038	MARION	MARION	177	NEW ASHFORD	NEW ASHFORD
618	MARLBOROUGH	MARLBOROUGH	200	NEW BEDFORD	NEW BEDFORD
039	MARSHFIELD	MARSHFIELD	182	New Boston	SANDISFIELD
021	Marston Mills	BARNSTABLE	975	NEW BRAINTREE	NEW BRAINTREE
085	MASHPEE	MASHPEE	136	New Lenox	LENOX
045	Matfield	WEST BRIDGEWATER	178	NEW MARLBOROUGH	NEW MARLBOROUGH
819	Mattapan	DORCHESTER (Boston)	480	NEW SALEM	NEW SALEM
040	MATTAPOISETT	MATTAPOISETT	339	NEWBURY	NEWBURY
620	MAYNARD	MAYNARD	318	NEWBURYPORT	NEWBURYPORT
736	MEDFIELD	MEDFIELD	183	Newstate	SAVOY
604	MEDFORD	MEDFORD	605	NEWTON	NEWTON
737	MEDWAY	MEDWAY	136	Niagara	LENOX
054	Megansett	FALMOUTH	615	Nobscot	FRAMINGHAM
619	MELROSE	MELROSE	605	Nonantum	NEWTON
946	MENDON	MENDON	211	Nonquitt	DARTMOUTH
081	Menemsha	CHILMARK	739	NORFOLK Norfolk Downs	NORFOLK
425	Merrick	WEST SPRINGFIELD	703		QUINCY
336	MERRIMAC	MERRIMAC	055	Norman	HARWICH
336 637	Merrimacport Metcalfs	MERRIMAC HOLLISTON	112	NORTH ADAMS NORTH ANDOVER	NORTH ANDOVER
317	METHUEN	METHUEN	319 215	NORTH ATTLEBORO	NORTH ANDOVER NORTH ATTLEBORO
013	MIDDLEBOROUGH	MIDDLEBOROUGH	948	NORTH BROOKFIELD	NORTH BROOKFIELD
576	MIDDLEBOROUGH	MIDDLEBOROUGH	819	North Dorchester	DORCHESTER (Boston)
645	Middlesex	SUDBURY	641	NORTH READING	NORTH READING
337	MIDDLETON	MIDDLETON	039	North River	MARSHFIELD
731	Midland	BELLINGHAM	512	NORTHAMPTON	NORTHAMPTON
915	MILFORD	MILFORD	949	NORTHBOROUGH	NORTHBOROUGH
178	Mill River	NEW MARLBOROUGH	917	NORTHBRIDGE	NORTHBRIDGE
031	Millbrook	DUXBURY	434	NORTHFIELD	NORTHFIELD
916	MILLBURY	MILLBURY	234	NORTON	NORTON
411	Millers Falls	MONTAGUE	041	NORWELL	NORWELL
480	Millington	NEW SALEM	716	NORWOOD	NORWOOD
738	MILLIS	MILLIS	634	Nutting Lake	BILLERICA
947	MILLVILLE	MILLVILLE			-
714	MILTON	MILTON		0	
044	Minot	SCITUATE	057	OAK BLUFFS	OAK BLUFFS
425	Mitteneague	WEST SPRINGFIELD	959	Oakdale	WEST BOYLSTON
479	MONROE	MONROE	976	OAKHAM	OAKHAM
479	Monroe Bridge	MONROE	039	Ocean Bluff	MARSHFIELD
422	MONSON	MONSON	239	Ocean Grove	SWANSEA
411	MONTAGUE	MONTAGUE	939	Old Furnace	HARDWICK
002	Montello	BROCKTON	215	Old Town	NORTH ATTLEBORO
175	MONTEREY	MONTEREY	016	Onset	WAREHAM
495	MONTGOMERY	MONTGOMERY	412	ORANGE	ORANGE
050	Monument Beach	BOURNE	058	ORLEANS	ORLEANS
477	Moores Corner	LEVERETT	021	Osterville	BARNSTABLE
086	Moorland	TRURO	179	OTIS	OTIS
971	Morningdale	BOYLSTON	956	Otter River	TEMPLETON
434	Mount Hermom	NORTHFIELD	950	OXFORD	OXFORD
511	Mount Tom	EASTHAMPTON		Р	
176	MOUNT WASHINGTON	MOUNT WASHINGTON	400		LDALMED
231	Myricks	BERKLEY	423	PALMER	PALMER
	N		977	PAXTON	PAXTON
050		LWECTEODS	320	PEABODY	PEABODY
650	Nabnasset	WESTFORD	577	PELHAM	PELHAM

Appendix B - Territory Codes

Code No	Village or Local	City or Town Name	Code	Village or Local Designation	City or Town Name
	Designation		No		
042	PEMBROKE PEPPERELL	PENBROKE	021	Santuit SAUGUS	BARNSTABLE
642 033		PEPPERELL	321 913	Saundersville	SAUGUS GRAFTON
180	Perry PERU	HANOVER PERU	183		
978	PETERSHAM	PETERSHAM	615	SAVOY Saxonville	SAVOY FRAMINGHAM
979	PHILLIPSTON	PHILLIPSTON	044	SCITUATE	SCITUATE
340	Pigeon Cove	ROCKPORT	011	Scotland	BRIDGEWATER
634	Pinehurst	BILLERICA	039	Sea View	MARSHFIELD
102	PITTSFIELD	PITTSFIELD	237	SEEKONK	SEEKONK
578	PLAINFIELD	PLAINFIELD	232	Segreganset	DIGHTON
740	PLAINVILLE	PLAINVILLE	741	SHARON	SHARON
055	Pleasant Lake	HARWICH	431	Shattuckville	COLRAIN
102	Plunkett	PITTSFIELD	634	Shawsheen	BILLERICA
014	PLYMOUTH	PLYMOUTH	311	Shawsheen Village	ANDOVER
071	PLYMPTON	PLYMPTON	137	SHEFFIELD	SHEFFIELD
050	Pocasset	BOURNE	435	SHELBURNE	SHELBURNE
711	Ponkapog	CANTON	743	Sheldonville	WRENTHAM
238	Pottersville	SOMERSET	674	SHERBORN	SHERBORN
312	Prides Crossing	BEVERLY	643	SHIRLEY	SHIRLEY
980	PRINCETON	PRINCETON	044	Shore Acres	SCITUATE
059	PROVINCETOWN	PROVINCETOWN	918	SHREWSBURY	SHREWSBURY
			482	SHUTESBURY	SHUTESBURY
l	Q		056	Siasconset	NANTUCKET
940	Quinapoxet	HOLDEN	036	Silver Lake	KINGSTON
703	QUINCY	QUINCY	403	Smiths Ferry	HOLYOKE
900	Quinsigamond	WORCESTER	238	SOMERSET	SOMERSET
054	Quisset	FALMOUTH	606	SOMERVILLE	SOMERVILLE
i	R		823	SOUTH BOSTON	SOUTH BOSTON (Bos)
l			819	South Dorchester	DORCHESTER (Boston)
717	RANDOLPH	RANDOLPH	513	SOUTH HADLEY	SOUTH HADLEY
235	RAYNHAM	RAYNHAM	434	South Vernon	NORTHFIELD
622	READING	READING	580	SOUTHAMPTON	SOUTHAMPTON
818	Readville	HYDE PARK (Boston)	952	SOUTHBOROUGH	SOUTHBOROUGH
236	REHOBOTH	REHOBOTH	919	SOUTHBRIDGE	SOUTHBRIDGE
110	Renfrew	ADAMS	178	Southfield	NEW MARLBOROUGH
803	REVERE	REVERE	952	Southville	SOUTHBOROUGH
181 181	RICHMOND Richmond Furnace	RICHMOND RICHMOND	444	SOUTHWICK	SOUTHWICK
582	Ringville	WORTHINGTON	920	SPENCER	SPENCER
044	Rivermoor	SCITUATE	400	SPRINGFIELD	SPRINGFIELD
944	Rochdale	LEICESTER	703	Squantum	QUINCY
043	ROCHESTER	ROCHESTER	011	State Farm	BRIDGEWATER
013	Rock	MIDDLEBOROUGH	139	State Line	WEST STOCKBRIDGE
015	ROCKLAND	ROCKLAND	953	STERLING Still Bivor	STERLING
340	ROCKPORT	ROCKPORT	974 138	Still River STOCKBRIDGE	HARVARD STOCKBRIDGE
816	ROSLINDALE	ROSLINDALE (Boston)	623	STONEHAM	STONEHAM
481	ROWE	ROWE (BOSTON)	651	Stonybrook	WESTON
341	ROWLEY	ROWLEY	718	STOUGHTON	STOUGHTON
820	ROXBURY	ROXBURY (Boston)	644	STOW	STOW
981	ROYALSTON	ROYALSTON	954	STURBRIDGE	STURBRIDGE
443	RUSSELL	RUSSELL	645	SUDBURY	SUDBURY
951	RUTLAND	RUTLAND	436	SUNDERLAND	SUNDERLAND
		, , ,	955	SUTTON	SUTTON
1	S		322	SWAMPSCOTT	SWAMPSCOTT
050	Sagamore	BOURNE	239	SWANSEA	SWANSEA
304	SALEM	SALEM	571	Swift River	CUMMINGTON
342	SALISBURY	SALISBURY	016	Swifts Beach	WAREHAM
310	Salisbury Point	AMESBURY		•	
044	Sandhills	SCITUATE		Т	
182	SANDISFIELD	SANDISFIELD	313	Tapleyville	DANVERS
060	SANDWICH	SANDWICH	202	TAUNTON	TAUNTON

Appendix B - Territory Codes

Code	Village or Local	City or Town
No	Designation	Name
956	Teaticket TEMPLETON	FALMOUTH TEMPLETON
943	TEWKSBURY	TEWKSBURY LANCASTER
	Thayer Thorndike	PALMER
423 423	Three Rivers	PALMER
233	Thwaites	FREETOWN
061	TISBURY	TISBURY
011	Titicut	BRIDGEWATER
496	TOLLAND	TOLLAND
371	TOPSFIELD	TOPSFIELD
239	Touisset	SWANSEA
647	TOWNSEND	TOWNSEND
016	Tremont	WAREHAM
086	TRURO	TRURO
412	Tully	ORANGE
411	Turners Falls	MONTAGUE
648	TYNGSBOROUGH	TYNGSBOROUGH
184	TYRINGHAM	TYRINGHAM
		•
<u></u>	U	
713	Unionville	FRANKLIN
957	UPTON	UPTON
921	UXBRIDGE	UXBRIDGE
	V	
	<u>-</u>	
061	Vineyard Haven	TISBURY
	W	
005	10/ah an	I NEWTON
605	Waban WAKEFIELD	NEWTON WAKEFIELD
624		WALES
497 719	WALES WALPOLE	WALPOLE
607	WALFOLE	WALTHAM
646	Wamesit	TEWKSBURY
054	Waquoit	FALMOUTH
302	Ward Hill	HAVERHILL
514	WARE	WARE
016	WAREHAM	WAREHAM
958	WARREN	WARREN
483	WARWICK	WARWICK
185	WASHINGTON	WASHINGTON
934	Waterford	BLACKSTONE
608	WATERTOWN	WATERTOWN
924	Waterville	WINCHENDON
611	Waverley	BELMONT
649	WAYLAND	WAYLAND
922	WEBSTER	WEBSTER
625	Wedgemere	WINCHESTER
202	Weir	TAUNTON
720	WELLESLEY	WELLESLEY
087	WELLFLEET	WELLFLEET
604	Wellington	MEDFORD
484	WENDELL	WENDELL
343	WENHAM	WENHAM
959	WEST BOYLSTON	WEST BOYLSTON
045	WEST BRIDGEWATER	WEST BRIDGEWATER
960	WEST BROOKFIELD	WEST BROOKFIELD
061	West Chop	TISBURY
344	WEST NEWBURY	WEST NEWBURY
815	WEST ROXBURY	WEST ROXBURY (Bos)

Code	Village or Local	City or Town
No	Designation	Name
425	WEST SPRINGFIELD	WEST SPRINGFIELD
139	WEST STOCKBRIDGE	WEST STOCKBRIDGE
088	WEST TISBURY	WEST TISBURY
923	WESTBOROUGH	WESTBOROUGH
045	Westdale	WEST BRIDGEWATER
424	WESTFIELD	WESTFIELD
650	WESTFORD	WESTFORD
581	WESTHAMPTON	WESTHAMPTON
961	WESTMINSTER	WESTMINSTER
651	WESTON	WESTON
240	WESTPORT	WESTPORT
613	Westvale	CONCORD
742	WESTWOOD	WESTWOOD
721	WEYMOUTH	WEYMOUTH
437	WHATELY	WHATELY
939	Wheelwright	HARDWICK
014	White Horse Beach	PLYMOUTH
932	White Valley	BARRE
921	Whitins	UXBRIDGE
917	Whitinsville	NORTHBRIDGE
017	WHITMAN	WHITMAN
202	Whittenton	TAUNTON
021	Wianno	BARNSTABLE
445	WILBRAHAM	WILBRAHAM
955	Wilkonsville	SUTTON
054	Williams	FALMOUTH
534	WILLIAMSBURG	WILLIAMSBURG
140	WILLIAMSTOWN	WILLIAMSTOWN
942	Williamsville	HUBBARDSTON
402 511	Willimansett Williston Mills	CHICOPEE EASTHAMPTON
652	WILMINGTON	WILMINGTON
924	WINCHENDON	WINCHENDON
625	WINCHENDON	WINCHENDON
186	WINDSOR	WINDSOR
716	Winslow	NORWOOD
606	Winter Hill	SOMERVILLE
810	WINTHROP	WINTHROP
626	WOBURN	WOBURN
703	Wollaston	QUINCY
054	Woods Hole	FALMOUTH
737	Woodside	MEDWAY
638	Woodville	HOPKINTON
900	WORCESTER	WORCESTER
443	Woronoco	RUSSELL
582	WORTHINGTON	WORTHINGTON
743	WRENTHAM	WRENTHAM
619	Wyoming	MELROSE
	Y	,
062	YARMOUTH	YARMOUTH
062	Yarmouthport	YARMOUTH
	Z	'
472	Zoar	CHARLEMONT
110	Zylonite	ADAMS
	,	-

Appendix B - Territory Codes

\star

TERRITORY CODE

NUMERICAL LISTING

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

First Position	County	First Position	County
0	Barnstable	4	Franklin
	Dukes		Hampden
	Nantucket	5	Hampshire
	Plymouth	6	Middlesex
1	Berkshire	7	Norfolk
2	Bristol	8	Suffolk
3	Essex	9	Worcester

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

City of Boston				
Definition	ZIP Code	Statistical Code		
BOSTON CENTRAL	02101-02118, 02123, 02133, 02199, 02201, 02202, 02203, 02210, 02215, 02241	821		
BRIGHTON	02134, 02135, 02163	822		
CHARLESTOWN-EAST BOSTON	02128, 02129	824		
DORCHESTER	02122, 02124, 02125, 02126	819		
HYDE PARK	02136, 02137	818		
JAMAICA PLAIN	02130	817		
ROSLINDALE	02131	816		
ROXBURY	02119, 02120, 02121	820		
SOUTH BOSTON	02127	823		
WEST ROXBURY	02132	815		

\star

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

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

Appendix B - Territory Codes

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
002	BROCKTON	BROCKTON	041	NORWELL	Accord
		Campello	042	PEMBROKE	PEMBROKE
		Montello			Bryantville
010	ABINGTON	ABINGTON	043	ROCHESTER	ROCHESTER
011	BRIDGEWATER	BRIDGEWATER	044	SCITUATE	SCITUATE
		Scotland] [Egypt
		State Farm] [Greenbush
		Titicut] [Humarock
012	HINGHAM	HINGHAM			Minot
013	MIDDLEBOROUGH	MIDDLEBOROUGH			Rivermoor
		Rock			Sandhills
014	PLYMOUTH	PLYMOUTH	11		Shore Acres
		Chiltonville	045	WEST BRIDGEWATER	WEST BRIDGEWATER
		Manomet	11		Cochessett
		White Horse Beach	11		Matfield
015	ROCKLAND	ROCKLAND	11		Westdale
016	WAREHAM	WAREHAM	050	BOURNE	BOURNE
		Onset	11		Bournedale
		Swifts Beach	11		Buzzards Bay
		Tremont	1 I		Cataumet
017	WHITMAN	WHITMAN	11		Monument Beach
021	BARNSTABLE	BARNSTABLE	1 1		Pocasset
021	BARRIOTABLE	Centerville	1 1		Sagamore
		Clement	051	CHATHAM	CHATHAM
		Cotuit	1 001	OHATTAW	Chathamport
		Craigville	052	DENNIS	DENNIS
021	BARNSTABLE	Cummaquid	1 002	DEININIO	Dennisport
021	DANNSTABLE	Hyannis	053	EDGARTOWN	EDGARTOWN
		Hyannisport	054	FALMOUTH	FALMOUTH
		Marston Mills	0.54	TALMOOTT	Hatchville
		Osterville	 		Longview
		Santuit	 		Megansett
		Wianno	 		Quisset
030	CARVER	CARVER	4 1		Teaticket
030	DUXBURY	DUXBURY	 		Waquoit
031	DUXBURT		4 1		Williams
		Island Creek	 		
032	EAST BRIDGEWATER	Millbrook EAST BRIDGEWATER	055	HARWICH	Woods Hole HARWICH
032	EAST BRIDGEWATER		055	HARWICH	
033	HANOVER	Elmwood HANOVER	 		Harwichport Norman
033	HANOVER	Assinippi	 		<u> </u>
		- ''	050	NANTHOKET	Pleasant Lake
00.4	HANSON	Perry	056	NANTUCKET	NANTUCKET
034	HANSON	HANSON	057	OAK BULEEO	Siasconset
		Burrage	057	OAK BLUFFS	OAK BLUFFS
035	HULL	HULL	058	ORLEANS	ORLEANS
		Allerton	059	PROVINCETOWN	PROVINCETOWN
		Nantasket Beach	060	SANDWICH	SANDWICH
036	KINGSTON	KINGSTON			Forestdale
		Silver Lake	061	TISBURY	TISBURY
037	LAKEVILLE	LAKEVILLE] 		Vineyard Haven
038	MARION	MARION	 		West Chop
039	MARSHFIELD	MARSHFIELD	062	YARMOUTH	YARMOUTH
		Brant Rock	# 1		Bass River
		Green Harbor	∦		Yarmouthport
		North River	070	HALIFAX	HALIFAX
		Ocean Bluff	071	PLYMPTON	PLYMPTON
		Sea View	080	BREWSTER	BREWSTER
040	MATTAPOISETT	MATTAPOISETT	081	CHILMARK	CHILMARK
		Antassawamock Neck			Menemsha
041	NORWELL	NORWELL	082	EASTHAM	EASTHAM

Appendix B - Territory Codes

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
083	GAY HEAD	GAY HEAD	182	SANDISFIELD	SANDISFIELD
084	GOSNOLD	GOSNOLD			New Boston
		Cuttyhunk	183	SAVOY	SAVOY
085	MASHPEE	MASHPEE			Brier
086	TRURO	TRURO			Newstate
000		Moorland	184	TYRINGHAM	TYRINGHAM
087	WELLFLEET	WELLFLEET	185	WASHINGTON	WASHINGTON
088	WEST TISBURY	WEST TISBURY	186	WINDSOR	WINDSOR
102	PITTSFIELD	PITTSFIELD	200	NEW BEDFORD	NEW BEDFORD
102	1111011228	Camp Merrill	200	I THE WEED I GIVE	Clifford
		Plunkett	201	FALL RIVER	FALL RIVER
110	ADAMS	ADAMS	201	I ALL RIVER	Bowenville
110	ADAMO	Maple Grove			Flint
		Renfrew	202	TAUNTON	TAUNTON
		Zylonite	202	IAGINION	Weir
111	GREAT BARRINGTON	GREAT BARRINGTON			Whittenton
111	GREAT BARRINGTON		210	ATTLEBORO	
440	NODTH ADAMS	Housatonic	210	ATTLEBORO	ATTLEBORO
112	NORTH ADAMS	NORTH ADAMS			Dodgeville
		Blackington	0.1.1	DARTMOUTH	Hebronville
	0.1501.1105	Greylock	211	DARTMOUTH	DARTMOUTH
130	CHESHIRE	CHESHIRE			Nonquitt
		Farnhams	212	EASTON	EASTON
131	CLARKSBURG	CLARKSBURG			Eastondale
		Briggsville	213	FAIRHAVEN	FAIRHAVEN
132	DALTON	DALTON	214	MANSFIELD	MANSFIELD
133	HINSDALE	HINSDALE	215	NORTH ATTLEBORO	NORTH ATTLEBORO
134	LANESBOROUGH	LANESBOROUGH			Adamsdale
		Berkshire			Attleboro Falls
135	LEE	LEE			Old Town
		Hurlburt	230	ACUSHNET	ACUSHNET
136	LENOX	LENOX			Long Plain
		Lenoxdale	231	BERKLEY	BERKLEY
		New Lenox			Myricks
		Niagara	232	DIGHTON	DIGHTON
137	SHEFFIELD	SHEFFIELD			Segreganset
		Ashley Falls	233	FREETOWN	FREETOWN
138	STOCKBRIDGE	STOCKBRIDGE			Assonet
		Glendale			Thwaites
		Interlaken	234	NORTON	NORTON
139	WEST STOCKBRIDGE	WEST STOCKBRIDGE			Barrowsville
		State Line			Chartley
140	WILLIAMSTOWN	WILLIAMSTOWN	235	RAYNHAM	RAYNHAM
170	ALFORD	ALFORD	236	REHOBOTH	REHOBOTH
171	BECKET	BECKET	237	SEEKONK	SEEKONK
172	EGREMONT	EGREMONT	238	SOMERSET	SOMERSET
173	FLORIDA	FLORIDA			Pottersville
175		Drury	239	SWANSEA	SWANSEA
		Hoosac Tunnel	200		Hortonville
174	HANCOCK	HANCOCK	1		Ocean Grove
175	MONTEREY	MONTEREY			Touisset
176	MOUNT WASHINGTON	MOUNT WASHINGTON	240	WESTPORT	WESTPORT
177	NEW ASHFORD	NEW ASHFORD	240	WESTFORT	Acoaxet
177	NEW MARLBOROUGH		1		Central Village
178	INEW WARLBUROUGH	NEW MARLBOROUGH			
		Clayton	200	LAZNINI	Horseneck Beach
		Hartsville	300	LYNN	LYNN
		Mill River	302	HAVERHILL	HAVERHILL
	0710	Southfield			Ayers Village
179	OTIS	OTIS			Bradford
180	PERU	PERU			Ward Hill
181	RICHMOND	RICHMOND	303	LAWRENCE	LAWRENCE
	1	Richmond Furnace	304	SALEM	SALEM

Appendix B - Territory Codes

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
310	AMESBURY	AMESBURY	411	MONTAGUE	Lake Pleasant
		Salisbury Point			Millers Falls
311	ANDOVER	ANDOVER			Turners Falls
		Ballard Vale	412	ORANGE	ORANGE
		Frye Village			Tully
		Shawsheen Village	420	AGAWAM	AGÁWAM
312	BEVERLY	BEVERLY			Feeding Hills
		Prides Crossing	421	LUDLOW	LUDLOW
313	DANVERS	DANVERS	422	MONSON	MONSON
		Danversport	423	PALMER	PALMER
		Hathorne			Bondsville
		Tapleyville			Thorndike
314	GLOUCESTER	GLOÚCESTER			Three Rivers
		Annisquam	424	WESTFIELD	WESTFIELD
		Lanesville	425	WEST SPRINGFIELD	WEST SPRINGFIELD
		Magnolia			Merrick
315	IPSWICH	IPSWICH			Mitteneague
		Little Neck	430	BUCKLAND	BUCKLAND
316	MARBLEHEAD	MARBLEHEAD	431	COLRAIN	COLRAIN
-		Clifton			Adamsville
317	METHUEN	METHUEN			Elmgrove
318	NEWBURYPORT	NEWBURYPORT			Griswoldville
319	NORTH ANDOVER	NORTH ANDOVER			Lyonsville
320	PEABODY	PEABODY			Shattuckville
321	SAUGUS	SAUGUS	432	DEERFIELD	DEERFIELD
0		Cliftondale	433	ERVING	ERVING
322	SWAMPSCOTT	SWAMPSCOTT			Farley
		Beach Bluff	434	NORTHFIELD	NORTHFIELD
330	ESSEX	ESSEX			Mount Hermom
331	GEORGETOWN	GEORGETOWN			South Vernon
332	GROVELAND	GROVELAND	435	SHELBURNE	SHELBURNE
333	HAMILTON	HAMILTON	436	SUNDERLAND	SUNDERLAND
000		Asbury Grove	437	WHATELY	WHATELY
334	LYNNFIELD	LYNNFIELD	440	CHESTER	CHESTER
335	MANCHESTER	MANCHESTER	441	EAST LONGMEADOW	EAST LONGMEADOW
336	MERRIMAC	MERRIMAC	442	LONGMEADOW	LONGMEADOW
		Merrimacport	443	RUSSELL	RUSSELL
337	MIDDLETON	MIDDLETON			Woronoco
338	NAHANT	NAHANT	444	SOUTHWICK	SOUTHWICK
339	NEWBURY	NEWBURY			Congamond
		Byfield	445	WILBRAHAM	WILBRAHAM
340	ROCKPORT	ROCKPORT	470	ASHFIELD	ASHFIELD
		Pigeon Cove	471	BERNARDSTON	BERNARDSTON
341	ROWLEY	ROWLEY	472	CHARLEMONT	CHARLEMONT
342	SALISBURY	SALISBURY		, , , ,	Zoar
. =		Cushing	473	CONWAY	CONWAY
343	WENHAM	WENHAM	474	GILL	GILL
344	WEST NEWBURY	WEST NEWBURY	475	HAWLEY	HAWLEY
370	BOXFORD	BOXFORD	476	HEATH	HEATH
371	TOPSFIELD	TOPSFIELD			Dell
400	SPRINGFIELD	SPRINGFIELD	477	LEVERETT	LEVERETT
		Brightwood			Hillsboro
		Indian Orchard			Moores Corner
402	CHICOPEE	CHICOPEE	478	LEYDEN	LEYDEN
		Fairview	479	MONROE	MONROE
		Willimansett		******	Monroe Bridge
403	HOLYOKE	HOLYOKE	480	NEW SALEM	NEW SALEM
.50		Ingleside			Cooleyville
		Smiths Ferry			Millington
410	GREENFIELD	GREENFIELD	481	ROWE	ROWE
	MONTAGUE	MONTAGUE			Davis

Appendix B - Territory Codes

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
482	SHUTESBURY	SHUTESBURY	606	SOMERVILLE	SOMERVILLE
483	WARWICK	WARWICK			Winter Hill
484	WENDELL	WENDELL	607	WALTHAM	WALTHAM
		Locks Village	608	WATERTOWN	WATERTOWN
490	BLANDFORD	BLANDFORD	610	ARLINGTON	ARLINGTON
491	BRIMFIELD	BRIMFIELD	611	BELMONT	BELMONT
492	GRANVILLE	GRANVILLE			Waverley
493	HAMPDEN	HAMPDEN	612	CHELMSFORD	CHELMSFORD
494	HOLLAND	HOLLAND	613	CONCORD	CONCORD
495	MONTGOMERY	MONTGOMERY			Westvale
496	TOLLAND	TOLLAND	614	DRACUT	DRACUT
497	WALES	WALES			Collinsville
510	AMHERST	AMHERST	615	FRAMINGHAM	FRAMINGHAM
		Cushman			Nobscot
511	EASTHAMPTON	EASTHAMPTON			Saxonville
		Mount Tom	616	HUDSON	HUDSON
		Williston Mills			Cove Landing
512	NORTHAMPTON	NORTHAMPTON	617	LEXINGTON	LEXINGTON
		Bay State Village	618	MARLBOROUGH	MARLBOROUGH
		Florence	619	MELROSE	MELROSE
		Laurel Park			Wyoming
		Leeds	620	MAYNARD	MAYNARD
513	SOUTH HADLEY	SOUTH HADLEY	621	NATICK	NATICK
514	WARE	WARE			Felchville
530	BELCHERTOWN	BELCHERTOWN	622	READING	READING
		Dwight	623	STONEHAM	STONEHAM
531	HADLEY	HADLEY	624	WAKEFIELD	WAKEFIELD
532	HATFIELD	HATFIELD			Greenwood
		Bradstreet	625	WINCHESTER	WINCHESTER
533	HUNTINGTON	HUNTINGTON			Wedgemere
534	WILLIAMSBURG	WILLIAMSBURG	626	WOBURN	WOBURN
		Haydenville	630	ACTON	ACTON
570	CHESTERFIELD	CHESTERFIELD	631	ASHLAND	ASHLAND
571	CUMMINGTON	CUMMINGTON	632	AYER	AYER
		Swift River	633	BEDFORD	BEDFORD
573	GOSHEN	GOSHEN	634	BILLERICA	BILLERICA
		Lithia			Nutting Lake
574	GRANBY	GRANBY			Pinehurst
576	MIDDLEFIELD	MIDDLEFIELD			Shawsheen
	DELLIANA	Bancroft	635	BURLINGTON	BURLINGTON
577	PELHAM	PELHAM	636	GROTON	GROTON
578	PLAINFIELD	PLAINFIELD	637	HOLLISTON	HOLLISTON
580	SOUTHAMPTON	SOUTHAMPTON			Braggville
581	WESTHAMPTON	WESTHAMPTON	- 000	LIODIGINITONI	Metcalfs
582	WORTHINGTON	WORTHINGTON	638	HOPKINTON	HOPKINTON
000	CAMPBUBGE	Ringville			Hayden Row
600	CAMBRIDGE	CAMBRIDGE		LINGGLN	Woodville
601	LOWELL	LOWELL	639	LINCOLN	LINCOLN
602	EVERETT	EVERETT	640	LITTLETON	LITTLETON
603	MALDEN	MALDEN	641	NORTH READING	NORTH READING PEPPERELL
		Edgeworth	642	PEPPERELL	
		Faulkner	643	SHIRLEY	SHIRLEY
		Linden	644	STOW	STOW
604	MEDEORD	Maplewood MEDFORD			Gleasondale
604	MEDFORD		CAF	SUDBURY	Lake Boon
		Glenwood	645	SUDBUKY	SUDBURY
605	NEWTON	Wellington	640	TEWICOLION	Middlesex
605	NEWTON	NEWTON	646	TEWKSBURY	TEWKSBURY
		Auburndale	0.47	TOWNSEND	Wamesit
	Í	Nonantum	647	TOWNSEND	TOWNSEND

Appendix B - Territory Codes

Code No	City or Town Name	Village or Local Designation	Code No	City or Town Name	Village or Local Designation
649	WAYLAND	WAYLAND	739	NORFOLK	NORFOLK City Mills
050	WESTERD	Cochituate	740	DI AINIVII I E	City Mills
650	WESTFORD	WESTFORD	740	PLAINVILLE SHARON	PLAINVILLE SHARON
		Coldspring	741 742	WESTWOOD	
		Forge Village	/42	WESTWOOD	WESTWOOD
		Graniteville	740	VA/DENITHANA	Islington WRENTHAM
		Nabnasset	743	WRENTHAM	
054	MECTON	Nashoba	000	CHELCEA	Sheldonville
651	WESTON	WESTON Kendall Green	802	CHELSEA REVERE	CHELSEA REVERE
			803	REVERE	
652	WILMINGTON	Stonybrook WILMINGTON	810	WINTHROP	Beachmont WINTHROP
670	ASHBY	ASHBY	815	WEST ROXBURY (Bos)	WEST ROXBURY
671	BOXBOROUGH	BOXBOROUGH	816	ROSLINDALE (Boston)	ROSLINDALE
672	CARLISLE	CARLISLE	817	JAMAICA PLAIN (Bos)	JAMAICA PLAIN
673	DUNSTABLE	DUNSTABLE	818	HYDE PARK (Boston)	HYDE PARK
674	SHERBORN	SHERBORN	010	HTDE PARK (BOSIOII)	Readville
702	BROOKLINE	BROOKLINE	819	DORCHESTER	DORCHESTER
702	QUINCY	QUINCY	019	(Boston)	Mattapan
703	QUINCT	Atlantic	11	(Boston)	North Dorchester
		Norfolk Downs	11		South Dorchester
		Squantum	820	ROXBURY (Boston)	ROXBURY
703	QUINCY	Wollaston	821	BOSTON (Central)	BOSTON (Central)
710	BRAINTREE	BRAINTREE	822	BRIGHTON (Boston)	BRIGHTON
710	CANTON	CANTON	022	BRIGHTON (BOSIOII)	Allston
/ 1 1	CANTON	Ponkapog	823	SOUTH BOSTON (Bos)	SOUTH BOSTON
712	DEDHAM	DEDHAM	824	CHARLESTOWN	CHARLESTOWN
112	DEDITAN	Ashcroft	024	(Boston)	East Boston
		Ellis	900	WORCESTER	WORCESTER
		Endicott	300	WORGESTER	Barbers
		Findlen	11		Greendale
713	FRANKLIN	FRANKLIN	11		Quinsigamond
710	TOANICEIN	Unionville	902	FITCHBURG	FITCHBURG
714	MILTON	MILTON	910	ATHOL	ATHOL
715	NEEDHAM	NEEDHAM	911	CLINTON	CLINTON
7.10	1422513,401	Avery	912	GARDNER	GARDNER
		Charles River Village	913	GRAFTON	GRAFTON
		Highlandville		Sittle Fort	Farnumsville
716	NORWOOD	NORWOOD	11		Fisherville
		Winslow	11		Saundersville
717	RANDOLPH	RANDOLPH	914	LEOMINSTER	LEOMINSTER
718	STOUGHTON	STOUGHTON	915	MILFORD	MILFORD
719	WALPOLE	WALPOLE	916	MILLBURY	MILLBURY
-		Bird Mills	917	NORTHBRIDGE	NORTHBRIDGE
720	WELLESLEY	WELLESLEY	11		Linwood
721	WEYMOUTH	WEYMOUTH	11		Whitinsville
730	AVON	AVON	918	SHREWSBURY	SHREWSBURY
731	BELLINGHAM	BELLINGHAM	919	SOUTHBRIDGE	SOUTHBRIDGE
		Caryville	11		Globe Village
		Midland	920	SPENCER	SPENCER
732	COHASSET	COHASSET	921	UXBRIDGE	UXBRIDGE
		Beechwood	11		Whitins
733	DOVER	DOVER	922	WEBSTER	WEBSTER
734	FOXBOROUGH	FOXBOROUGH	923	WESTBOROUGH	WESTBOROUGH
735	HOLBROOK	HOLBROOK	924	WINCHENDON	WINCHENDON
		Brookville	11		Waterville
736	MEDFIELD	MEDFIELD	930	ASHBURNHAM	ASHBURNHAM
		Harding	11		Manns Crossing
737	MEDWAY	MEDWAY	931	AUBURN	AUBURN
-		Woodside	932	BARRE	BARRE
738	MILLIS	MILLIS	11		White Valley

Massachusetts Private Passenger Automobile Statistical Plan Appendix B - Territory Codes

Code	City or Town	Village or Local
No	Name	Designation
933	BERLIN	BERLIN
		Carters
934	BLACKSTONE	BLACKSTONE
		Waterford
935	BROOKFIELD	BROOKFIELD
936	CHARLTON	CHARLTON
		Dodge
937	DOUGLAS	DOUGLAS
938	DUDLEY	DUDLEY
939	HARDWICK	HARDWICK
		Furnace
		Gilbertville
		Old Furnace
		Wheelwright
940	HOLDEN	HOLDEN
		Jefferson
		Quinapoxet
941	HOPEDALE	HOPEDALE
942	HUBBARDSTON	HUBBARDSTON
		Williamsville
943	LANCASTER	LANCASTER
		Thayer
944	LEICESTER	LEIĆESTER
		Cherry Valley
		Rochdale
945	LUNENBURG	LUNENBURG
946	MENDON	MENDON
947	MILLVILLE	MILLVILLE
948	NORTH BROOKFIELD	NORTH BROOKFIELD
949	NORTHBOROUGH	NORTHBOROUGH
950	OXFORD	OXFORD
951	RUTLAND	RUTLAND
952	SOUTHBOROUGH	SOUTHBOROUGH
		Cordaville
		Fayville
		Southville
953	STERLING	STERLING
		Loring
954	STURBRIDGE	STURBRIDGE
		Fiskdale
955	SUTTON	SUTTON
		Manchaug
		Wilkonsville

Code No	City or Town Name	Village or Local Designation	
956	TEMPLETON	TEMPLETON	
		Baldwinville	
		Otter River	
957	UPTON	UPTON	
958	WARREN	WARREN	
959	WEST BOYLSTON	WEST BOYLSTON	
		Oakdale	
960	WEST BROOKFIELD	WEST BROOKFIELD	
961	WESTMINSTER	WESTMINSTER	
970	BOLTON	BOLTON	
971	BOYLSTON	BOYLSTON	
		Morningdale	
973	EAST BROOKFIELD	EAST BROOKFIELD	
974	HARVARD	HARVARD	
		Still River	
975	NEW BRAINTREE	NEW BRAINTREE	
976	OAKHAM	OAKHAM	
		Coldbrook Spring	
977	PAXTON	PAXTON	
978	PETERSHAM	PETERSHAM	
979	PHILLIPSTON	PHILLIPSTON	
980	PRINCETON	PRINCETON	
981	ROYALSTON	ROYALSTON	
	OUT OF STATE TO	WN CODES	
991	CONNECTICUT		
992	MAINE		
993	NEW HAMPSHIRE		
994	NEW YORK		
995	RHODE ISLAND		
996	VERMONT		
999	OTHER		

Appendix C – Traffic Law Violations

•	The following	abbreviations	are used in	n Appendix C:
---	---------------	---------------	-------------	---------------

M.G.L. c , §	Chapter and Section of the Massachusetts General Laws
CMR	Code of Massachusetts Regulations

- The following out-of-state incidents are to be counted as Major Traffic Violations:
 - Operating under the influence of liquor and/or narcotics (including assignment to a driver alcohol education program)
 - ♦ Vehicular Homicide

MAJOR TRAFFIC VIOLATIONS			
Bypass ignition interlock for another	M.G.L. c. 90, § 24U(a)(1)		
Child endangerment while OUI	M.G.L. c. 90, § 24V		
Driving to Endanger or Reckless Driving	M.G.L. c. 90, § 24		
Leaving Scene of Accident after Injuring a Person	M.G.L. c. 90, § 24		
Leaving Scene of Accident after Injuring a Property	M.G.L. c. 90, § 24		
Leaving Scene of Personal Injury and Death	M.G.L. c. 90, § 24		
Liquor and Narcotics, operating under the influence of (including assignment	M.G.L. c. 90, § 24		
to a driver alcohol education program or controlled substance treatment or rehabilitation program under M.G.L. c. 90 § 24D)			
Liquor and Narcotics, operating under the influence of and reckless operation	M.G.L. c. 90, § 24L		
causing serious injury			
Manslaughter (only if by Motor Vehicle)	M.G.L. c. 265, § 13		
Manslaughter while OUI	M.G.L. c. 265, § 13½		
Operate without ignition interlock	M.G.L. c. 90, § 24S(a)		
Operating after Revocation of License	M.G.L. c. 90, § 23		
Operating after Suspension of Drivers License	M.G.L. c. 90, § 23		
OUI while license suspended for OUI	M.G.L. c. 90, § 23		
Permit unlicensed suspended operation of MV	M.G.L. c. 90, § 12(b)		
Permit operation without ignition interlock	M.G.L. c. 90, § 12(c)		
Refusing to Stop for Officer	M.G.L. c. 90, § 25		
Tamper with ignition interlock	M.G.L. c. 90, § 24T(a)		
Vehicular Homicide	M.G.L. c. 90, § 24G		

• All out-of-state incidents which can be classified in any one of the Minor Traffic Violation categories listed in the tables on pages C:2 – C:8 shall be counted as Minor Traffic Violations.

MINOR TRAFFIC VIOLATIONS	
Accident, hit and run	M.G.L. c. 90, § 24
Alleys and driveways, emerging from, must stop	720 CMR 9.06(20)
Allowing vehicle to stand unattended, motor running	M.G.L. c. 90, § 13
Anything on or in vehicle or on person interferes with operation	M.G.L. c. 90, § 13
Attempting a speed record	M.G.L. c. 90, § 13
Backing and u-turns prohibited	730 CMR 7.08(17)(b)
Backing up for missed ramp	720 CMR 9.08(3) 730 CMR 7.08(17)(b)
Blind pedestrians, must stop for	M.G.L. c. 90, § 14A
Blow horn when necessary	720 CMR 9.06(15)
Brakes, inadequate	730 CMR 7.05(5)(g)
Brakes, operating without	M.G.L. c. 90, § 7
Bridges, speed law	M.G.L. c. 85, § 20
Careless operation - construction zone	730 CMR 7.08(12)(c)
Careless or negligent operation	730 CMR 7.08(5)(a)
Channelizing island, no driving on	720 CMR 9.06(22)
Coasting	730 CMR 7.08(16)
Crossing solid pavement markings	730 CMR 7.08(8)
Crosswalk, motor vehicle not to enter if his car will block it	M.G.L. c. 89, § 11
Crosswalk, operator yield to pedestrian	M.G.L. c. 89, § 11
Cutting in after passing	720 CMR 9.06(3)
Deploying unauthorized sign	730 CMR 7.08(1)(a)
Directional signals, devices required	M.G.L. c. 90, § 7
Directional signals, hand or mechanical required for lane change	M.G.L. c. 90, § 14B
Drag racing, speeding	M.G.L. c. 90, § 17B
Driving in "breakdown lane"	M.G.L. c. 89, § 4B
Driving within 8 feet of street car stopped for passengers	M.G.L. c. 90, § 14
Emergency vehicles, right of way	M.G.L. c. 89, § 7
Employ unlicensed operator	M.G.L. c. 90, § 12(a)
Entry into excluded area - construction zone	730 CMR 7.08(12)(b)
Entry into restricted area - general	730 CMR 7.08(11)(a)
Entry into restricted area - left lane restrictions	730 CMR 7.08(11)(b)
Exhibit another license	M.G.L. c. 90, § 23
Failure to ascertain if it is safe to change lanes	M.G.L. c. 89, § 4A
Failure to comply with orders	730 CMR 7.08(1)(b)
	M.G.L. c. 90, § 14
	350 CMR 4.01(4)
Failure to keep to the right when turning right	720 CMR 9.06(16)
	730 CMR 7.08(17)(c)
Failure to keep to the far left when turning on a one/two way street	M.G.L. c. 90, § 14
Failure to fasten a trailer to a tow vehicle with proper safety chains	M.G.L. c. 90, § 7
	M.G.L. c. 90, § 14
Failure to give proper stopping or turning signals	350 CMR 4.01(4)
	730 CMR 7.08(17)(c)

MINOR TRAFFIC VIOLATIONS (continued)			
	M.G.L. c. 89, § 4B		
	350 CMR 4.01(4)		
Failure to keep in right lane	720 CMR 9.06(16)		
	730 CMR 7.08(13)(a)		
	730 CMR 7.08(13)(b)		
Egilure to keep to right when view is chatrusted up to 400 feet	M.G.L. c. 89, § 4		
Failure to keep to right when view is obstructed up to 400 feet	720 CMR 9.06(16)		
Failure to obey sign	730 CMR 7.08(1)(a)		
Failure to obey traffic control signal	730 CMR 7.08(2)		
Failure to see that movement can be made in safety before starting, stopping,	720 CMR 9.06(9)		
turning or backing up			
Failure to stop at sign or signal at intersection	M.G.L. c. 89, § 9		
Failure to stop at toll booth	730 CMR 7.03(2)		
Failure to use care in stopping or turning - hand signals	730 CMR 7.08(17)(c)		
Failure to use child restraint	M.G.L. c. 90, § 7AA		
Fire apparatus, driving within 300 feet if going to a fire	M.G.L. c. 89, § 7A		
Fire apparatus, failing to pull to right and stop	M.G.L. c. 89, § 7A		
Fire Department, interfering with	M.G.L. c. 89, § 7A		
Flashing red traffic signal, failure to stop	M.G.L. c. 89, § 9		
- Habiting road trained organis, ramane to etop	730 CMR 7.08(2)		
Following too closely	720 CMR 9.06(7)		
	730 CMR 7.08(15)		
Hand signals, failure to give	M.G.L. c. 90, § 14B		
	350 CMR 4.01(4)		
	M.G.L. c. 90, § 31		
Headlights, dimming from high beam	540 CMR 22.00		
	730 CMR 7.08(22)(b)		
Headlights, one half hour after sunset	M.G.L. c. 90, § 7		
Headlights, improper use of	730 CMR 7.08(22)(a)		
	730 CMR 7.08(22)(b)		
Headphones, wearing while operating	M.G.L. c. 90, § 13		
Height, operating vehicle when elevated or lowered	M.G.L. c. 90, § 7P		
Hit and run, person injured Hit and run, property damage	M.G.L. c. 90, § 24 M.G.L. c. 90, § 24		
	730 CMR 7.08(21)		
Horn, improper use of	` ,		
Horn, operating without Horn, sound when necessary	M.G.L. c. 90, § 7 720 CMR 9.06(15)		
•			
Ignition key, remove from unattended vehicle	M.G.L. c. 90, § 13		
Improper entry to a way	730 CMR 7.08(7)		
Improper passing	M.G.L. c. 89, § 1		
Improper use of cutouts	730 CMR 7.08(20)		
Inadequate equipment (brakes, directional signals, lights or safety devices)	730 CMR 7.08(27)		
Inspection sticker, failure to display	M.G.L. c. 90, § 20		
inspection sticker, failure to display	730 CMR 7.08(26)		

MINOR TRAFFIC VIOLATIONS (continued)			
Inspection sticker, operating without	M.G.L. c. 90, § 7A M.G.L. c. 90, § 20 730 CMR 7.08(26)		
Interfering with sign	730 CMR 7.08(1)(a)		
Intersecting way, slow down when approaching	M.G.L. c. 90, § 14		
Junior operator's license, operating in violation of	M.G.L. c. 90, § 8		
Keeping to the right when overtaking another vehicle	730 CMR 7.08(13)(a) 730 CMR 7.08(13)(b)		
Lane, marked, no straddling	720 CMR 9.06(1)		
Learner's permit, motorcycle, violation of	M.G.L. c. 90, § 8B		
Learner's permit, operating in violation of	M.G.L. c. 90, § 8B		
License, Class 1-2-3	M.G.L. c. 90, § 8A 540 CMR 2.06		
License, operating when not properly licensed	M.G.L. c. 90, § 10		
License, violation of restriction	M.G.L. c. 90, § 8		
Lights, operating motor vehicle with improper lights	M.G.L. c. 90, § 7 & § 16		
Liquor, operation of motor vehicle containing alcoholic beverage, minor (under age 21)	M.G.L. c. 138, § 34C		
Making a turn from the wrong lane of traffic	M.G.L. c. 90, § 14		
Making a right turn on a red light where prohibited	M.G.L. c. 89, § 8		
Meeting other vehicles, exercise due care when	M.G.L. c. 89, § 1		
Mirrors and reflectors, operating without proper	M.G.L. c. 90, § 7		
Minimum separation	730 CMR 7.06(5)(f)4 730 CMR 7.06(6)(e)4		
Motorcycle, operating without proper equipment, lights and headgear	M.G.L. c. 90, § 7		
Motorcycle, no more than 2 abreast	M.G.L. c. 89, § 4A		
Motorcycle, no passenger unless machine so designed	M.G.L. c. 90, § 13		
Motorcycle, single file when passing	M.G.L. c. 89, § 4A		
Negligent loading	730 CMR 7.08(5)(b)		
Negligently operating	M.G.L. c. 90, § 24 730 CMR 7.08(5)(a)		
No stopping	730 CMR 7.06(5)(f)5 730 CMR 7.06(6)(e)5		
Not reasonably to right for vehicle approaching from the opposite direction	M.G.L. c. 89, § 1		
Noise, offensive, unreasonable (squealing tires)	M.G.L. c. 90, § 16		
Not slowing down and keeping right of center on approaching intersection or corner where view is obstructed	M.G.L. c. 90, § 14		
Not yielding to oncoming vehicles when making a left turn	M.G.L. c. 90, § 14		

MINOR TRAFFIC VIOLATIONS (continued)			
Obstructing emergency vehicle	M.G.L. c. 89, § 7		
One way street	M.G.L. c. 89, § 10		
	720 CMR 9.05(1) & (2)		
	730 CMR 7.05(1)		
One way street, left turn from	M.G.L. c. 90, § 14		
Operating after suspension or revocation of registration	M.G.L. c. 90, § 23		
Operating, at crosswalk yield to pedestrian	720 CMR 9.06(27)		
Operating, being overtaken, must not increase speed	720 CMR 9.06(5)		
	730 CMR 7.08(14)		
Operating on a bet or wager	M.G.L. c. 90, § 24		
Operating car not properly registered	M.G.L. c. 90, § 9		
Operating, disobeying sign, signal or marker	350 CMR 4.01(1) & (7)		
	720 CMR 9.06(10),(11),		
	(12),(17)		
	720 CMR 9.07(4)		
	730 CMR 7.08(1)(a)		
Operating, don't enter intersection or crosswalk unless crossing can be	720 CMR 9.06(6)(b)		
completed			
Operating, don't obstruct movement of traffic	720 CMR 9.06(6)(a)		
Operating, don't pass unless safe	720 CMR 9.06(3) & (4)		
	730 CMR 7.08(14)		
Operating, funerals and processions	720 CMR 9.06(24)		
	M.G.L. c. 272, § 42		
Operating in violation of license restrictions	M.G.L. c. 90, § 8		
Operating, men & equipment in highway	720 CMR 9.06(25)		
Operating at speed greater than reasonable or proper	M.G.L. c. 90, § 17		
Operating, marked lanes staying within	720 CMR 9.06(01)		
Operating, motorcycle without permanent seat	M.G.L. c. 90, § 13		
Operating motor vehicle without liability policy	M.G.L. c. 90, § 34J		
Operating, no driving on sidewalks	720 CMR 9.06(19)		
	M.G.L. c. 89, § 1		
Operating, obey traffic signs, signals, markings	M.G.L. c. 90, § 18		
	350 CMR 4.01(1) & (7)		
	720 CMR 9.06(10),(11),		
	(12),(17)		
	720 CMR 9.07(4)		
	730 CMR 7.08(1)(a)		
	730 CMR 7.08(2)		

MINOR TRAFFIC VIOLATIONS (continued)
Operating on road surface closed to travel due to construction or repair	720 CMR 9.06(18)
Operating, obey yield signs	720 CMR 9.06(14)
Operating on ways divided into lanes	M.G.L. c. 89, § 4A
Operating through peekhole in snow on windshield	M.G.L. c. 90, § 13
Operating truck or bus, using passing lane where signs prohibit	720 CMR 9.08(5)
Operating, turning where signs prohibit	720 CMR 9.06(21)
Operating, U turn contrary to sign	720 CMR 9.06(22)
Operating unregistered car	M.G.L. c. 90, § 9
Operating, use right lane	720 CMR 9.06(2)
Operating without proper mirrors and reflectors	M.G.L. c. 90, § 7
Operator not to obstruct passing vehicle	M.G.L. c. 89, § 2,
	730 CMR 7.08(14)
Parking lights	M.G.L. c. 90, § 7
Passing a vehicle stopped for a pedestrian in a crosswalk	M.G.L. c. 89, § 1
	350 CMR 4.01(8)
Passing bicycles, slow down	M.G.L. c. 90, § 14
Passing, care in passing another vehicle	730 CMR 7.08(14)
Passing, commercial vehicles, excess 2 and one half tons (except busses)	M.G.L. c. 89, § 4C
use right lane pass in adjacent lane	
Passing, don't obstruct passer	M.G.L. c. 89, § 2
Passing horses, use care	M.G.L. c. 90, § 14
Passing on right, unless vehicle being passed is (A) making a left turn, (B) on	M.G.L. c. 89, § 2
one way street (C) on a divided highway	
Passing school bus when flashers are on	M.G.L. c. 90, § 14
Passing vehicle forbidden if view is obstructed for less than 400 feet	M.G.L. c. 89, § 4
Pedestrian, failing to exercise due care to avoid colliding with	720 CMR 9.06(28)
	350 CMR 4.01(8)
Pedestrian, must slow down for	M.G.L. c. 90, § 14
	350 CMR 4.01(8)
Permitting Operation by a person who has no legal right	M.G.L. c. 90, § 12
Procession, following vehicle ahead as closely as is practical and safe	720 CMR 9.06(24)
Racing	M.G.L. c. 90, § 24
Railroad crossing, failure to slow down	M.G.L. c. 90, § 15
Railroad crossing, failure to stop while lights are flashing or gate lowered	M.G.L. c. 90, § 15
Rear lights, must have	M.G.L. c. 85, § 15
Rear lights, operating without	M.G.L. c. 90, § 7
Red flag or light, rear of load	M.G.L. c. 90, § 7

MINOR TRAFFIC VIOLATIONS (continued)		
Red flashing signal, stop	M.G.L. c. 89, § 9	
Trou had hig digital, otop	730 CMR 7.08(2)	
Right of way, fire engines, patrol wagons, ambulances	M.G.L. c. 89, § 7	
Right of way, failure to yield to an approaching vehicle	720 CMR 9.06(14)	
Right of way, pedestrian in a crosswalk	M.G.L. c. 89, § 11	
Safety glass, operating or permitting operation without	M.G.L. c. 90, § 9A	
School bus, driver's responsibilities	M.G.L. c. 90, § 7B	
School bus, railroad crossing, must stop and open door	M.G.L. c. 90, § 15	
School bus, speed limited	M.G.L. c. 90, § 17	
School zone, speed limit	M.G.L. c. 90, § 17	
Siren law	M.G.L. c. 90, § 16	
Slow down to pass pedestrian	M.G.L. c. 90, § 14	
Slow moving vehicles, keep right on upgrade	M.G.L. c. 89, § 4	
Slow moving vehicles, keep 200 feet apart	720 CMR 9.06(8)	
Space between vehicles	730 CMR 7.08(15)	
Speed at railroad crossings	M.G.L. c. 90, § 15	
Speed, bridges	M.G.L. c. 85, § 20	
Speed, certain vehicles to operate 5 m.p.h. below speed posted	M.G.L. c. 90, § 17	
Speed, decrease for special hazards (pedestrians, traffic, weather)	M.G.L. c. 90, § 17	
Speed, excess speed - construction zone	730 CMR 7.08(12)(a)	
Speed, failure to regulate when men and equipment are on road	M.G.L. c. 90,§ 17	
Speed, faster than posted	M.G.L. c. 90, § 17	
	M.G.L. c. 90, § 18	
	350 CMR 4.01(2)	
	730 CMR 7.08(6)(c)	
Speed, greater than reasonable and proper	M.G.L. c. 90, § 17	
1 1	730 CMR 7.08(6)(a)	
Speed limit 15 m.p.h. near vehicle peddling merchandise, when flashing lights	M.G.L. c. 90, § 17	
Speed limits, thickly settled district, school zone	M.G.L. c. 90, § 17	
Speed, maximum speed	730 CMR 7.08(6)(c)	
Speed, minimum speed	730 CMR 7.08(6)(c)	
Speed, operating at dangerous speed	730 CMR 7.08(6)(b)	
Speed, reasonable and proper	730 CMR 7.08(6)(a)	
Speed, special regulations	M.G.L. c. 90, § 18	
Speed, school bus	M.G.L. c. 90, § 17	
Stolen car, operating	M.G.L. c. 90, § 24	
Stop before passing school bus	M.G.L. c. 90, § 14	
Stop sign, failure to completely stop	720 CMR 9.06(13)	
Stop signs	M.G.L. c. 89, § 9	
Stopping, standing, or parking	730 CMR 7.08(17)(a)	

Appendix C – Traffic Law Violations

MINOR TRAFFIC VIOLATIONS (continued)		
Street car, care in passing	M.G.L. c. 90, § 14	
Street car, 8 foot stopping law	M.G.L. c. 90, § 14	
Tailgating	720 CMR 9.06(7)	
Television in operator's view	M.G.L. c. 90, § 13	
Throughways, right of way	M.G.L. c. 89, § 9	
Tires too wide	M.G.L. c. 90, § 19	
Traffic, refusing to comply with lawful order of police officer when directing	720 CMR 9.07(3)	
	350 CMR 4.01(6)	
	730 CMR 7.08(1)(b)	
Traffic control lights, failure to obey	720 CMR 9.06(10)	
	730 CMR 7.08(2)	
Traffic signals, flashing red is same as stop sign	M.G.L. c. 89, § 9	
Tread depth, tires	M.G.L. c. 90, § 7Q	
	540 CMR 4.04	
Turning where signs prohibit	720 CMR 9.06(23)	
Turning improperly	M.G.L. c. 90, § 14	
Unauthorized entry or exit from a way	730 CMR 7.05(3)	
Unauthorized or dangerous crossing of median or other area	730 CMR 7.08(10)(a)	
Unauthorized use of breakdown lane	730 CMR 7.08(9)	
Unauthorized use of cross-over	730 CMR 7.08(10)(b)	
Unlawful speed on County Bridge	M.G.L. c. 85, § 20	
Unattended vehicle, stop engine, set brakes, remove key from switch and	M.G.L. c. 90, § 13	
from vehicle		
U turn where signs prohibit	720 CMR 9.06(26)	
Vehicles excluded area, operating or permitting one's vehicle to be operated	M.G.L. c. 90, § 16	
where posted	350 CMR 4.01(10)	
Violation of Department of Highways rule or regulation or by-laws relative to	M.G.L. c. 85, § 2	
signs, lights, signal systems, traffic devices markings		
Violation of left lane exclusion of heavy vehicles	M.G.L. c. 89, § 4C	
Violation of right of way at intersecting ways	M.G.L. c. 89, § 8	
Violation of gubernatorial by-laws on ways of the Commonwealth	M.G.L. c. 85, § 23	
Wrong direction in Sumner, Callahan, or Ted Williams Tunnel	730 CMR 7.05(2)	
Wrong way travel	730 CMR 7.05(1)	
"Yield sign," failure to surrender to oncoming traffic, stop if necessary	720 CMR 9.06(14)	