

AUTOMOBILE

STATISTICAL PLAN

LINE 56

AMERICAN ASSOCIATION OF INSURANCE SERVICES
701 WARRENVILLE ROAD, SUITE 100 -- Lisle, IL 60532

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* Page 47 was revised on 4/22/94.

SECTION I

GENERAL INSTRUCTIONS

PART A — REPORTING INSTRUCTIONS

1. Experience To Be Reported

Report all direct written premium and paid loss activity for:

Private Passenger Automobile Policies and endorsements.
Commercial Automobile Policies and endorsements.

Include statistics for:

- Salvage and subrogation recoveries
- Paid and outstanding allocated loss adjustment expenses (ALAE)
- Assigned risk policies or service carrier

Do not include or adjust statistics for:

- Reinsurance business ceded
- Reinsurance business assumed
- Estimates for incurred but not reported losses (IBNR)
- Endorsements written on forms from other lines of business.*

2. Data to be Reported

The instructions for reporting are contained in the various parts of this section. The fields and their codes are located in SECTION II -- CODING INSTRUCTIONS. **Only these codes may be used when submitting statistics.**

3. Report Frequency and Required Report Dates

- All data is to be reported quarterly.
- Premium, paid loss and paid loss adjustment expense records are to be reported with the month during which the transaction occurred.
- Outstanding loss and outstanding loss adjustment expense records are to be valued and reported as of the last month of the quarter being reported.
- Data is to be submitted via the Statistical Data Management Application no later than 60 calendar days following the close of the period being reported. Companies that cannot file on time must have a company officer notify the *AAIS Data Management Department* as soon as possible.
- Written premium, paid loss and paid loss adjustment expense data may be reported monthly or annually, but only after receiving approval from *AAIS Data Management Department* in advance of the first submission.

* Endorsements written on forms from other lines of business must be reported according to the instructions in the statistical plan for the other line and not included in the experience for this line.

4. Method of Reporting - Statistical Data Management Application (SDMA)

A. Statistical Data Management Application Access

All data is to be submitted through the Statistical Data Management Application. This web-based application can be accessed through the AAISdirect website.

B. Processing Results in the SDMA

When new submissions are processed in the SDMA, the following will be automatically generated in the case of processing completing successfully:

- Submission date/time
- Submitted by (should be user's AAISdirect username)
- Filename
- Total Records
- Error Records (if any)
- Status of uploaded file
- Actions (column contains a dropdown menu for further actions)

Additionally, a transmittal row will be automatically generated and will accompany every statistical submission. Selecting the transmittal row will open the *Processing Results* table below the *Existing Results* window. The *Processing Results* table will summarize the written premium, written exposure, written record count, paid loss, paid claim count, paid record count, outstanding loss, outstanding claim count, outstanding record count, total money, and total record count.

EXPOSURE count is the sum of all values reported in the EXPOSURE field for all premium records. Paid CLAIM COUNT is the sum of all values reported in the CLAIM COUNT field for all paid loss records (excluding paid ALAE records). Outstanding CLAIM COUNT is the sum of all values reported in the CLAIM COUNT field for all outstanding loss records (excluding outstanding ALAE records). Record count is simply a count of the number of statistical records submitted.

The *Processing Results* window should be verified before submitting data in the SDMA. See SECTION 1, PART C, 1c on reviewing and verifying data submissions.

PART B — CODING INSTRUCTIONS

1. How to Use This Plan

The record layouts are located at the front of SECTION II -- CODING INSTRUCTIONS. The rest of this part of SECTION I contains general instructions on such subjects as cancellations, policy changes and adjustments of errors. **This section must be read and understood before continuing to the detailed instructions.**

The items of information (field) required on the statistical record is shown on the record layouts and in the index at the front of Section II. Coding and instructions for each field are located in Section II.

2. Number of Statistical Records Required Per Policy

One premium record is required for each coverage on an automobile.

Most claims only require one loss record per claim. However, multiple loss records on a claim are necessary when a loss involves different coverages or different causes of loss.

3. Premium Bearing Endorsements

There are three rules covering this subject:

- A. Any endorsement written on other than an Automobile form must be coded according to the statistical plan for the line of insurance involved.
- B. Expansion of basic limits by endorsement does **not** require a separate statistical record. The extra premium is simply reported combined with the basic premium.
- C. Additional coverage, **not** included in the basic automobile policy but added by endorsement, requires a separate statistical entry.

Note that when an endorsement is added during the policy period, special instructions may apply. See rule 6 on the following page.

4. Cancellations

When a policy is cancelled, resubmit the original statistical records with the following changes.

- The premium amount field must be changed to reflect the amount of unearned premium. This is done by entering the returned premium as a negative amount.
- The sign of the exposure field must be changed to negative.
- The number of months covered must be changed to reflect the time remaining on the policy or installment period at the time of the cancellation.
- The accounting date must be changed to the date of the cancellation.

5. Adjustment of Errors

Errors in submitted data are corrected by submitting a reversal of the original entry along with the correct entry. A "reversal" record carries exactly the same coding as the original transaction in error except that the signs of the premium/loss and exposure/claim count fields are reversed.

Errors discovered by AAIS and returned to the company for correction should be handled in accordance with the instructions accompanying the data when it is returned.

6. Policy Changes (Coverage Changes)

These special instructions are provided to handle policy changes that occur **during** the policy or installment period. Policy changes that come at the beginning of the policy period require no special handling because the normal statistical records will simply reflect the new policy conditions.

These instructions apply only to premium records because loss records always reflect the policy conditions at the time of loss and are unaffected by changes in the policy occurring before or after the loss.

Changes that affect policy premium and/or a statistically coded item of information must generate a statistical record. These changes can be organized into three groups:

A. Coverage Additions or Deletions (But Not Changes in Existing Coverages)

This is the simplest case. The regular procedures are followed to generate the necessary statistical record. Adding an additional coverage during the policy period will generate the same record the item would have generated if it had been present from the beginning. The only exception is that the months covered code will reflect fewer months of coverage in the added statistical record. Similarly, if a coverage is dropped, the cancellation rules are followed to generate the record for the lost coverage. Other records for the policy remain unchanged.

6. Policy Changes (cont.)

B. Changes that **Do Not** Affect Statistically reported Information (Including Changes in Existing Coverages)

First, if the changes does not include an adjustment to the premium (collected or returned), then no record of any kind is needed.

Second, if the change does include an adjustment to the premium **and** the change is made **at** policy inception, there is no need to report additional statistical records. However, the reported premium **must** reflect the change.

Third, if the change does include an adjustment to the premium **and** the change is made **after** policy inception, some or all of the original premium records issued for this policy should be cancelled and new premium records should be reported with the adjusted premium charges.

C. Changes that **Do** Affect Statistically Reported Information (Including Changes in Existing Coverages)

This is the most complex change to handle. This situation requires canceling the remaining coverage from the original statistical record. Then, a new record is reported to reflect the new policy conditions in effect for the remainder of the policy period. **These instructions must be followed even if the change does not involve a change in premium.**

For example, if an insured increases the property damage liability limits from \$10,000 to \$25,000 after three months of coverage, two statistical records are required. The first will cancel the original property damage record according to the rules in the cancellation section. The months covered field will represent the number of months remaining in the policy period and the premium field must reflect the negative value of the premium that would have been charged for the remaining months. The second record will be a normal premium record coded according to the new policy conditions. The months covered field on this record will also be coded with the months remaining in the policy period. The premium field will reflect the prorated premium for the adjusted coverage. The transaction code in both records should be "1".

The same procedure applies regardless of the field that is changed (deductible, liability limit, etc.)

7. Special Cases

The instructions in this statistical plan may not cover every coding situation. It is recognized that the desire to keep the plan as concise and straightforward as possible may cause a lack of clarity in special situations. The general rule is to "code it like it is rated", but where this does not help, AAIS *Data Management Department* is available to answer questions.

Companies are urged to make use of the *AAIS Data Management Department*. Assistance is available for writing procedures, designing computer programs, and training staff at all levels. Write, phone, email, or visit the AAIS office in Lisle, Illinois.

8. Limited Coding

This rule is not a requirement. It is being provided for those systems incapable of reporting changes to policies in the procedures described in Rule 6 in this section of this statistical plan.

Premium records with Limited Coding require that only the following fields be reported:

- *LINE OF INSURANCE* (pos. 1-2)
- *ACCOUNTING DATE* (pos. 3-5)
- *COMPANY CODE* (pos. 6-9)
- *STATE CODE* (pos. 10-11)
- *TRANSACTION CODE* (pos. 16)
- *PREMIUM AMOUNT* (pos. 17-26)
- *COVERAGE CODE* (pos. 28)
- *SUBLINE* (pos. 29)
- *MONTHS COVERED* (pos. 49-50)
- *POLICY IDENTIFICATION* (pos. 66-79)
- *NC PROGRAM ENHANCEMENT INDICATOR* (pos. 80) [North Carolina Only]

Loss records with Limited Coding require that only the following fields be reported:

- *LINE OF INSURANCE* (pos. 1-2)
- *ACCOUNTING DATE* (pos. 3-5)
- *COMPANY CODE* (pos. 6-9)
- *STATE CODE* (pos. 10-11)
- *TRANSACTION CODE* (pos. 16)
- *LOSS AMOUNT* (pos. 17-26)
- *COVERAGE CODE* (pos. 28)
- *SUBLINE* (pos. 29)
- *CLAIM COUNT* (pos. 44-48)
- *CAUSE OF LOSS* (pos. 49)
- *ACCIDENT DATE* (pos. 56-59)
- *OCCURRENCE IDENTIFICATION* (pos. 66-77)
- *OCCURRENCE IDENTIFIER* (pos. 78-79)
- *NC PROGRAM ENHANCEMENT INDICATOR* (pos. 80) [North Carolina Only]

Fields other than the ones listed above are to be left blank or reported with their applicable "does not apply" codes.

The *STATE CODE* and *SUBLINE* code are those to which the premium was assigned in the company's Annual Statement.

This Limited Coding option is not to be used in the following situations:

- issuing a policy or coverage
- canceling a policy or coverage
- when the *STATE CODE* or *COVERAGE CODE* data elements are changed

PART C — DETAIL REPORTING INSTRUCTIONS

1. Instructions To All Companies

The coding of regular policy activity is a simple task and requires little instruction. However, there are special situations that complicate matters. The special cases have been collected and placed in the previous portion of this plan (PART B — GENERAL REPORTING INSTRUCTIONS). It is imperative that coders and procedures writers read and understand Part B before continuing here.

2. Statistical Data Management Application Basics

a. Accessing the SDMA

The Statistical Data Management Application can be accessed by logging into the AAISdirect website (<https://www.aisdirect.com/>) and selecting AAIS Statistical Reporting under the Services tab. If you experience issues when logging into AAISdirect, please contact your company's AAISdirect administrator. A PDF of the manual for the SDMA can also be accessed through the AAISdirect Support Center.

b. Uploading Data

To upload data, click the Upload File button in the top left of the application. Select the file you would like to upload. A blue bar will indicate that the file is uploading, and this upload process can be canceled by clicking the 'X' at the end of the bar if the uploading is still in progress.

c. Reviewing and Verifying Submissions

Once uploaded, the transmittal row will be created under the *Existing Submissions* section if there is at least one record without any row errors. Selecting the transmittal row will open the *Processing Results* table which should be reviewed to ensure correct totals. After review, choose *Submit Data* from the dropdown list in the *Action* column of the transmittal row. An Acknowledgement window will prompt a name and phone number of the individual verifying the data.

See SECTION 1, PART D - CORRECTIONS TO INVALID DATA for correcting errors when present.

3. Acceptable File Formats

The following file formats are accepted when submitting data through the SDMA:

- a. .txt files
- b. Encrypted .pgp files
- c. .zip files

4. Instructions For SDMA Uploading In EBCDIC Format

The EBCDIC file format generated by a mainframe (or midrange) system should have the following characteristics:

- Decimal points are not permitted in the PREMIUM/LOSS AMOUNT fields (the right two positions are assumed to be cents).
- The amount fields (PREMIUM/LOSS AMOUNT and EXPOSURE/CLAIM COUNT) must be signed with the sign in the low order (units) position of the field. Unused high order positions must be zero-filled.
- Records may be blocked or unblocked.

5. Instructions For SDMA Uploading In ASCII Format

When submitting data files, the following Mainframe ASCII file format is available.

The ASCII text file format generated by a mainframe (or midrange) system should have these characteristics:

- Not comma delimited
- Decimal points are not permitted in the PREMIUM/LOSS AMOUNT fields
- The end of each record should have a “carriage return/line feed”
- Negative signs should be indicated in the low order (units) position of the amount fields (PREMIUM/LOSS AMOUNT and EXPOSURE/CLAIM COUNT). Negative values must be signed, while positive values may be signed or unsigned as indicated below:

| Negative Amounts | | Unsigned Positive Amounts | | Signed Positive Amounts | |
|------------------|--------|---------------------------|--------|-------------------------|--------|
| Numeric Value | Symbol | Numeric Value | Symbol | Numeric Value | Symbol |
| -0 | } | 0 | 0 | +0 | { |
| -1 | J | 1 | 1 | +1 | A |
| -2 | K | 2 | 2 | +2 | B |
| -3 | L | 3 | 3 | +3 | C |
| -4 | M | 4 | 4 | +4 | D |
| -5 | N | 5 | 5 | +5 | E |
| -6 | O | 6 | 6 | +6 | F |
| -7 | P | 7 | 7 | +7 | G |
| -8 | Q | 8 | 8 | +8 | H |
| -9 | R | 9 | 9 | +9 | I |

PART D - CORRECTIONS TO INVALID DATA

1. ERROR DETAIL REPORTS

An Error Detail Report can be accessed by selecting *Download Error Detail Report* in the dropdown list under the *Action* column. This report lists each record that is in error with an explanation of the error. All errors in the report should be corrected and documented before verifying and submitting the data.

2. CORRECTIONS TO INVALID CODES

After each problem is identified, and the correct codes are determined, a company has two options for correcting the data.

- a. Individual Corrections - Select *Edit Data* in the dropdown list under the *Action* column. Here, you may select the row and field that needs correction, and manually make the correction. Select 'Done' and you may make further corrections or save the current changes. Once saved, the system will prompt documentation of the corrections made.
- b. Bulk Corrections - Select *Edit Data* in the dropdown list under the *Action* column. Instead of selecting individual records, you can filter the records based on any field to make corrections to all the filtered records at once. This option should be used when all filtered records have the same reason for the correction. Once saved, the system will prompt documentation of the corrections made.

3. AAIS EDIT REVIEW PROCESS

After verifying and submitting the corrections, the submission status will automatically change to *AAIS Edit Review*. At this stage, AAIS will review the corrections and documentation. If corrections and documentation are sufficient, AAIS will accept the data and set the status to *AAIS Accepted*. If errors persist and/or documentation is insufficient, AAIS will not accept the data and set it back to the *Ready for Review* status or to the *Contact AAIS* status until the necessary changes are made. If the corrections needed are unclear, please contact the *AAIS Data Management Department* for clarification.

4. TIMING OF CORRECTIONS

Corrections must be submitted to AAIS within 10 business days after the ready for review status is set.

SECTION II

CODING INSTRUCTIONS

AUTOMOBILE STATISTICAL PLAN INDEX

| Data Item | Page Number | Record Position |
|--|-------------|-----------------|
| Accident Date | 34 | 56-59 (L) |
| Accounting Date | 13 | 3-5 |
| Amounts (Premium and Loss) | 16 | 17-26 |
| Anti-Lock Brakes Discount Code | 39 | 94 |
| Anti-Theft Device Discount Code | 40 | 95-96 |
| Assigned Risk Classification Codes | 46-64 | 104-109 |
| Cause of Loss | 32 | 49 (L) |
| Claim Count | 31 | 44-48 (L) |
| Claim Identifier (Occurrence I.D.) | 35 | 78-79 (L) |
| Commercial Automobile Classification | 22 | 34 |
| Commercial Automobile Use | 23 | 35 |
| Company Code | 13 | 6-9 |
| Coverage | 17-19 | 28 |
| Deductible Amount | 28 | 37 |
| Defensive Driver Discount Code | 41 | 97 |
| Exception Code A | 67-68 | 114-115 |
| Exception Code B | 69-70 | 116-117 |
| Exception Code C | 71-72 | 118-119 |
| Exception Code D | 73 | 120-121 |
| Experience Rating Modification Factor | 65 | 110-112 (P) |
| Exposure | 30 | 44-48 (P) |
| Liability Limits Amount | 24-27 | 36 |
| Limited Coding - Loss Transaction Code | 65 | 125 |
| Line of Insurance | 13 | 1-2 |
| Model Year | 30 | 41-42 |
| Months Covered | 31 | 49-50 |
| New Jersey Deductible Code | 43 | 99 |
| New Jersey PIP Limits | 43 | 100 |
| NC Program Enhancement Indicator | 35 | 80 |
| Occurrence Identification | 35 | 66-77 |
| Operators Age | 21 | 30 |
| Optional Zip Code Indicator | 15 | 15 |
| Package Code | 34 | 64 |
| Passive Restraint Discount Code | 39 | 93 |
| PIP Limits/Deductible Code | 42 | 98 |
| Policy Identification | 35 | 66-79 |
| Pool Affiliation | 35 | 65 |
| Priv. Pass. Drivers Train/Good Student | 22 | 34 |
| Private Passenger Penalty Points | 23 | 35 |
| Program | 17 | 27 |
| Rating/Terminal Zone Code | 44-45 | 101-103 |
| Sex/Marital Status | 21 | 31 |
| Single/Multi Car | 34 | 56 |
| State Code | 14 | 10-11 |
| Subline | 20 | 29 |
| Symbol Code | 37-38 | 91-92 |
| Territory | 15 | 12-14 |
| Terrorism Indicator | 33 | 51 |
| Transaction Code | 16 | 16 |
| Uninsured/Underinsured Motorist | 30 | 43 |
| UM/UIM Stacking Indicator | 36 | 90 |
| Vehicle Class | 29 | 38-40 |
| Vehicle Identification Number | 74 | 151-167 |
| Vehicle Performance | 22 | 33 |

AUTOMOBILE STATISTICAL PLAN INDEX

| Data Item | Page Number | Record Position |
|------------------|--------------------|------------------------|
| Vehicle Use | 21 | 32 |
| Zip Code | 36 | 81-85 |

AMERICAN ASSOCIATION OF INSURANCE SERVICES

RECORD LAYOUT -- AUTOMOBILE (56) PREMIUM TRANSACTIONS

| | | | | | | | |
|-----------------------|----|-----------------------------|-----|---|-----|-------------------------------------|-----|
| Line of Insurance | 1 | Terrorism Indicator | 51 | Rating/ Terminal Zone | 101 | | 151 |
| Accounting Date | 5 | | 55 | Assigned Risk Classification Codes | 105 | Vehicle Identification Number | 155 |
| Company Code | | Single/Multi Car | | Experience Rating Modification | 110 | | 160 |
| State Code | 10 | Reserved | 60 | Reserved | | | |
| Territory | | Package | | Exception Code A | 115 | | 165 |
| Optional ZIP Code Ind | 15 | Pool Affiliation | 65 | Exception Code B | | | |
| Transaction | | | | Exception Code C | | | |
| Premium Amount | 20 | Policy Identification | 70 | Exception Code D | 120 | | 170 |
| | 25 | | 75 | Reserved | 125 | | 175 |
| Program | | | | | | | |
| Coverage | | | | | | | |
| Subline | | | | | | | |
| Operators Age | 30 | NC Pgm Enhance Ind | 80 | | 130 | | 180 |
| Sex & Marital Status | | ZIP Code | | Reserved For Census Track | 135 | Reserved | 185 |
| Vehicle Use | | | | Reserved | | | |
| Vehicle Performance | | | | | | | |
| Training/Comm. Class | | | | | | | |
| Penalty Pt./ Com. Use | 35 | Optional ZIP Code Suffix | 85 | | | | |
| Liability Limits | | | | | | | |
| Deductible | | | | | | | |
| Vehicle Class | 40 | UM/UIM Stacking Ind | 90 | | 140 | | 190 |
| Model Year | | Symbol Code | | Company Use | 145 | | 195 |
| Unins/Underins. Mot. | | Passive Restraint | | | | | |
| Exposure | 45 | Anti-Lock Brakes | | | | | |
| | | Anti-Theft Device | 95 | | | | |
| | | Defensive Driver | | | | | |
| Months Covered | 50 | PIP Limits/Ded. | | | | | |
| | | NJ PIP Limits | | | | | |
| | | NJ Deductible | 100 | | 150 | | 200 |

AMERICAN ASSOCIATION OF INSURANCE SERVICES

RECORD LAYOUT -- AUTOMOBILE (56) LOSS TRANSACTIONS

| | | | | | | | |
|-----------------------|----|-----------------------------|-----|--|-----|-------------------------------------|-----|
| Line of Insurance | 1 | Terrorism Indicator | 51 | Rating/ Terminal Zone | 101 | | 151 |
| Accounting Date | 5 | Reserved | 55 | Assigned Risk Classification Codes | 105 | Vehicle Identification Number | 155 |
| Company Code | | Accident Date | | Limited Loss ID | 110 | | 160 |
| State Code | 10 | Reserved | 60 | Reserved | | | |
| Territory | | Package | | Exception Code A | 115 | | 165 |
| Optional ZIP Code Ind | 15 | Pool Affiliation | 65 | Exception Code B | | | |
| Transaction | | | | Exception Code C | | | |
| Loss Amount | 20 | Occurrence Identification | 70 | Exception Code D | 120 | | 170 |
| | | | | Reserved | 125 | | 175 |
| | 25 | | 75 | | | | |
| Program | | Claim Identifier | | | | | |
| Coverage | | NC Pgm Enhance Ind | 80 | | 130 | | 180 |
| Subline | | ZIP Code | | Reserved For Census Track | 135 | Reserved | 185 |
| Operators Age | 30 | Optional ZIP Code Suffix | | Reserved | | | |
| Sex & Marital Status | | UM/UIM Stacking Ind | 90 | | 140 | | 190 |
| Vehicle Use | | Symbol Code | | Company Use | 145 | | 195 |
| Vehicle Performance | | Passive Restraint | | | | | |
| Training/Comm. Class | | Anti-Lock Brakes | | | | | |
| Penalty Pt./ Com. Use | 35 | Anti-Theft Device | 95 | | | | |
| Liability Limits | | Defensive Driver | | | | | |
| Deductible | | PIP Limits/Ded. | | | | | |
| Vehicle Class | 40 | NJ PIP Limits | | | | | |
| Model Year | | NJ Deductible | 100 | | 150 | | 200 |
| Unins/Underins. Mot. | | | | | | | |
| Claim Count | 45 | | | | | | |
| Cause of Loss | | | | | | | |
| Reserved | 50 | | | | | | |

| LINE OF INSURANCE | | (Pos. 1 — 2) |
|---|--|--------------|
| This code is used on both Private Passenger and Commercial Automobile records. It permits computer programs to identify the line of insurance and the AAIS Statistical Plan in use. | | |
| Code | | Line |
| 56 | | Automobile |

| ACCOUNTING DATE | | (Pos. 3 — 5) |
|--|--|------------------------|
| Enter the calendar month and last digit of the calendar year in which the premium was booked or the loss or allocated loss adjustment expense was paid, regardless of policy effective date or date of loss. | | |
| On outstanding losses and outstanding allocated loss adjustment expenses, code the last month of the calendar quarter and year. | | |
| For example: | | |
| Code | | Accounting Date |
| 010 | | January, 2000 |
| 090 | | September, 2000 |
| 101 | | October, 2001 |
| 112 | | November, 2002 |
| 123 | | December, 2003 |

| COMPANY CODE | | (Pos. 6 — 9) |
|---|--|--------------|
| Enter the four digit company identification code as assigned by AAIS. | | |
| NOTE: Company Groups must report under each individual company code. | | |

| STATE CODE (Pos. 10 — 11) | | | |
|--|-------------------|------|----------------|
| Code the state in which the insured vehicle is principally garaged or kept.* | | | |
| Code | State | Code | State |
| 01 | Alabama | 27 | Nevada |
| 02 | Arizona | 28 | New Hampshire |
| 03 | Arkansas | 29 | New Jersey |
| 04 | California | 30 | New Mexico |
| 05 | Colorado | 31 | New York |
| 06 | Connecticut | 32 | North Carolina |
| 07 | Delaware | 33 | North Dakota |
| 08 | Dist. of Columbia | 34 | Ohio |
| 09 | Florida | 35 | Oklahoma |
| 10 | Georgia | 36 | Oregon |
| 11 | Idaho | 37 | Pennsylvania |
| 12 | Illinois | 38 | Rhode Island |
| 13 | Indiana | 39 | South Carolina |
| 14 | Iowa | 40 | South Dakota |
| 15 | Kansas | 41 | Tennessee |
| 16 | Kentucky | 42 | Texas |
| 17 | Louisiana | 43 | Utah |
| 18 | Maine | 44 | Vermont |
| 19 | Maryland | 45 | Virginia |
| 20 | Massachusetts | 46 | Washington |
| 21 | Michigan | 47 | West Virginia |
| 22 | Minnesota | 48 | Wisconsin |
| 23 | Mississippi | 49 | Wyoming |
| 24 | Missouri | 52 | Hawaii |
| 25 | Montana | 54 | Alaska |
| 26 | Nebraska | 58 | Puerto Rico |

***NOTE:** For commercial policies where the state in which the vehicle is principally garaged or kept is unknown or varies during the year, code the state in which the policy was written.

| TERRITORY | (Pos. 12 — 14) |
|--|-----------------------|
| <p>This field does not apply to assigned risks. Refer to your Automobile Insurance Plan Rate Manual for assigned risk territory codes.</p> <p>The territory code on all commercial business (including zone rated risks) is the territory in which the vehicle is principally garaged. Some states may have different territory codes for private passenger and commercial business.</p> <p>Enter the territory used in determining the vehicle's premium. Territory codes may be either a two or three digit code. If the territory code is a two-digit territory code, then enter a 0 in Position 12 and enter the territory code in Positions 13 and 14.</p> | |

| OPTIONAL ZIP CODE INDICATOR | | (Pos. 15) |
|--|-----------------------|------------------|
| <p>This code identifies records where ZIP Code was not collected for rating purposes. If it is not available, set the field to Y, otherwise blank.</p> | | |
| Code | Program Used | |
| Y | ZIP Code Not Required | |

| TRANSACTION CODE | | (Pos. 16) |
|--|---|------------------|
| This code distinguishes among the various premium, loss, and allocated loss adjustment expense transactions. | | |
| Code | Transaction | |
| 1 | Premium or Cancellation | |
| 2 | Paid Loss | |
| 3 | Outstanding Loss | |
| 6 | Paid Allocated Loss Adjustment Expense | |
| 7 | Outstanding Allocated Loss Adjustment Expense | |
| 8 | Limited Coding | |
| <p>Transaction Codes 1 — 3 apply to all Coverages (Pos 28).</p> <p>Transaction Codes 6 and 7 apply to liability (Coverage Codes 1, 2 and 3).</p> <p>Outstanding Allocated Loss Adjustment Expense Data must be statistically reported only when it is reserved on a case basis. Companies that do not reserve this expense on a case basis should not report Transaction Code 7 records.</p> <p>Outstanding Loss and Outstanding Allocated Loss Adjustment Expense Records: Report the final reserve amount as of the end of each quarter.</p> | | |

| PREMIUM AND LOSS AMOUNTS | (Pos. 17 — 26) |
|--|-----------------------|
| This is not a code. | |
| Enter the actual premium amount, paid or outstanding loss amount, premium adjustment, or paid or outstanding allocated loss adjustment expense in dollars and cents. | |
| For automated records, the sign of this field is placed over the low-order position. | |
| Outstanding loss and outstanding allocated loss adjustment expense records should always have the amount reserved for the claim as of the end of the quarter. This amount must be reported each quarter it remains outstanding. If a partial payment is made on an outstanding loss, the new reserve amount must be reported if the claim is not closed by the end of the quarter. | |

| PROGRAM (Pos. 27) | |
|---|---|
| This code identifies the basic rules and forms used to write this policy. | |
| Code | Program Used |
| 3 | ISO Program |
| C | Exempt Commercial Risk: ISO forms and class codes |
| 5 | All Other Programs (including independent bureaus) |
| F | Exempt Commercial Risk: Independent forms but ISO class codes |

| COVERAGE (Pos. 28) | |
|--|--|
| <p>The premium reported for each coverage should include all discounts applied to that coverage.</p> <p>These codes do not apply to Arkansas (<i>State code 03</i>) and Pennsylvania (<i>State code 37</i>). For Arkansas and Pennsylvania coverage codes, refer to the following pages.</p> | |
| Code | Description |
| | LIABILITY COVERAGES: |
| 1 | Bodily Injury Liability |
| 2 | Property Damage Liability |
| 3 | Bodily Injury and Property Damage Liability — Indivisible Premium |
| 4 | Personal Injury Protection |
| 5 | Medical Payments |
| 6 | Uninsured/Underinsured Motorists — Indivisible Premium |
| X | Uninsured Motorist |
| Y | Underinsured Motorist |
| | PHYSICAL DAMAGE COVERAGES: |
| 7 | Physical Damage — Collision |
| 8 | Physical Damage — Other Than Collision |
| T | Physical Damage — Other Than Collision — Additional Coverage Records |
| 9 | All Other Property and Liability Coverages |
| | Terrorism Coverages (applicable to commercial auto policies only - subline 2): |
| H | Certified acts of terrorism covered (coverage not excluded) -- liability only |
| W | Certified acts of terrorism covered (coverage not excluded) -- physical damage only |
| Z | Certified acts of terrorism covered (coverage not excluded) -- liability and physical damage |
| <p>*The premium reported for each coverage should include all discounts applied to that coverage.</p> <p>When reporting terrorism coverages (codes H, W, and Z), many statistical fields do not apply. As a result, leave these fields blank (territory code, operator's age, sex & marital status, vehicle use, vehicle performance, commercial automobile classification, commercial automobile use, liability limits, deductible amount, vehicle class, model year, uninsured/underinsured motorist, single/multi-car, package code, zip code, symbol code, passive restraint, anti-lock brakes, anti-theft device, defensive driver, PIP limits/deductible, rating/terminal zone, assigned risk classification codes, experience rating modification, exception codes A, B, C, and D).</p> | |

| COVERAGE (AR) (Pos. 28) | |
|---|--|
| The following codes apply to Arkansas (<i>State code 03</i>) only. For coverage codes for Pennsylvania (<i>State code 37</i>), refer to the follow page. For coverage codes for all other states, refer to the previous page. | |
| Code | Description |
| 1 | Bodily Injury Liability |
| 2 | Property Damage Liability |
| 3 | Bodily Injury and Property Damage Liability Combined |
| 5 | Medical Payments |
| 6 | Uninsured/Underinsured Motorists Indivisible Premium |
| X | Uninsured Motorists |
| Y | Underinsured Motorists |
| 7 | Physical Damage - Collision |
| 8 | Physical Damage - Other Than Collision |
| T | Physical Damage - Other Than Collision - Additional Coverage Records |
| S | Medical Benefits |
| U | Loss of Income |
| V | Accidental Death |
| 9 | All Other |

| COVERAGE (PA) | | (Pos. 28) |
|--|--|-----------|
| The following codes apply to Pennsylvania (<i>State code 37</i>) only. For coverage codes for Arkansas (<i>State code 03</i>) and all other states, refer to the previous pages. | | |
| Code | Description | |
| 1 | Bodily Injury Liability | |
| 2 | Property Damage Liability | |
| 3 | Bodily Injury and Property Damage Liability Combined | |
| 5 | Extraordinary Medical Payments | |
| 6 | Uninsured/Underinsured Motorists Indivisible Premium | |
| X | Uninsured Motorists | |
| Y | Underinsured Motorists | |
| 7 | Physical Damage - Collision | |
| 8 | Physical Damage - Other Than Collision | |
| T | Physical Damage - Other Than Collision - Additional Coverage Records | |
| 9 | All Other | |
| Policies Not Subject to Worker's Compensation First Party Benefits Coverage | | |
| A | Medical Benefits | |
| B | Medical Benefits plus any Funeral Benefits Limit | |
| C | Loss of Income | |
| D | Death Benefit | |
| E | Funeral Benefit | |
| F | Combined First Party Benefits | |
| G | Combined First Party Benefits - Indivisible Premium Policies | |
| Policies Subject to Worker's Compensation First Party Benefits Coverage | | |
| J | Medical Benefits | |
| K | Medical Benefits plus any Funeral Benefits Limit | |
| L | Loss of Income | |
| M | Death Benefit | |
| N | Funeral Benefit | |
| P | Combined First Party Benefits | |
| R | Combined First Party Benefits - Indivisible Premium Policies | |
| * The premium reported for each coverage should include all discounts applied to that coverage. | | |

| SUBLINE | | (Pos. 29) |
|---------|------------------------|-----------|
| Code | Description | |
| 1 | Private Passenger Auto | |
| 2 | Commercial Auto | |

| OPERATOR'S AGE | | (Pos. 30) |
|---|--|-----------|
| Code the highest rated operator of the vehicle regardless of the principal or secondary operator. | | |
| On all loss records, this field reflects the highest rated operator not the driver of the vehicle at the time of the accident. | | |
| Code | Age | |
| 1 | 17 and Under | |
| 2 | 18 | |
| 3 | 19 | |
| 4 | 20 | |
| 5 | 21 — 24 | |
| 6 | 25 — 29 | |
| 7 | 30 — 54 | |
| 8 | 55 — 64 | |
| 9 | 65 and over | |
| 0 | Multi-car risk - Specific operator not assigned to this automobile | |
| 0 | Not applicable to Commercial Automobile policies | |

| SEX AND MARITAL STATUS | | (Pos. 31) |
|--|--|-----------|
| Enter the appropriate code for the highest rated operator of each insured vehicle. | | |
| Codes 1-6 are invalid in gender neutral states. | | |
| Code | Status | |
| 1 | Married Male | |
| 2 | Single Male — Principal | |
| 3 | Single Male — Secondary | |
| 4 | Married Female | |
| 5 | Single Female — Principal | |
| 6 | Single Female — Secondary | |
| 7 | Married — Gender Neutral State Only | |
| 8 | Single — Gender Neutral State Only | |
| 0 | Multi-car risk - Specific operator not assigned to this automobile | |
| 0 | Not applicable to Commercial Automobile policies | |

| VEHICLE USE | | (Pos. 32) |
|--------------------|--|-----------|
| Code | Use of Vehicle | |
| 1 | Work/School — Under 15 Miles | |
| 2 | Work/School — Over 15 Miles | |
| 3 | Pleasure — Under 7500 Miles | |
| 4 | Pleasure — Over 7500 Miles | |
| 5 | Business — No Youthful Operator | |
| 6 | Business — Youthful Operator | |
| B | Business — Operator Age Unspecified | |
| 7 | Farm — No Youthful Operator | |
| 8 | Farm — Youthful Operator | |
| F | Farm — Operator Age Unspecified | |
| 0 | Not applicable to Commercial Automobile policies | |
| 0 | Not applicable to Private Passenger Assigned Risks | |

| VEHICLE PERFORMANCE | | (Pos. 33) |
|----------------------------|--|-----------|
| Code | Type | |
| 1 | Standard | |
| 2 | Intermediate | |
| 3 | High | |
| 4 | Sports Car | |
| 5 | Sports Premium (New Jersey Only) | |
| 9 | All Other | |
| 0 | Not applicable to Commercial Automobile policies | |

| PRIVATE PASSENGER DRIVERS TRAINING — GOOD STUDENT | | (Pos. 34) |
|--|--|-----------|
| This field applies to Subline 1 (Private Passenger) only. | | |
| Code | Description | |
| 1 | Drivers Training — Good Student Discount | |
| 2 | Drivers Training — No Good Student Discount | |
| 3 | No Drivers Training — Good Student Discount | |
| 4 | No Drivers Training — No Good Student Discount | |
| 5 | Not applicable | |

| COMMERCIAL AUTOMOBILE CLASSIFICATION | | (Pos. 34) |
|---|---|-----------|
| This field applies to Subline 2 (Commercial Auto) only. | | |
| Code | Description | |
| 1 | Commercial Automobile — Non-fleet including trucks, trailers, and semitrailers. | |
| 2 | Commercial Automobile — Fleet including trucks, trailers, and semitrailers. | |
| 3 | Private Passenger — Non-fleet | |
| 4 | Private Passenger — Fleet | |
| 5 | Garage Risks | |
| 6 | Dealers | |
| 7 | Public — taxicabs, public livery and public buses | |
| 8 | School Buses | |
| 9 | All other | |

| PRIVATE PASSENGER PENALTY POINTS | | (Pos. 35) |
|---|--|------------------|
| This field only applies to voluntary private passenger business (Subline 1). Leave this field blank on all Assigned Risks. Proceed to "Commercial Automobile Use" for all Commercial Automobiles. | | |
| Code | Number of Penalty Points | |
| 0 | No penalty points | |
| 1 | 1 penalty point | |
| 2 | 2 penalty points | |
| 3 | 3 penalty points | |
| 4 | 4 penalty points | |
| 5 | 5 penalty points | |
| 6 | 6 penalty points | |
| 7 | 7 or more penalty points | |
| 8 | Inexperienced driver (less than 3 years), but accident and conviction free | |

| COMMERCIAL AUTOMOBILE USE | | (Pos. 35) |
|--|-------------------------------|------------------|
| These codes only apply to Commercial Automobile business (Subline 2). Use the codes listed below for Commercial Automobile Classification (Pos. 34) codes 1 and 2. This field is optional for Commercial Classification codes 3 and 4. Leave this field blank for all other Commercial Automobile records. | | |
| Code | Use | |
| 1 | Service — 50 miles or less | |
| 2 | Service — 51 - 200 miles | |
| 3 | Service — over 200 miles | |
| 4 | Retail — 50 miles or less | |
| 5 | Retail — 51 - 200 miles | |
| 6 | Retail — over 200 miles | |
| 7 | Commercial — 50 miles or less | |
| 8 | Commercial — 51 - 200 miles | |
| 9 | Commercial — over 200 miles | |

| LIABILITY LIMITS AMOUNT | | | |
|---|--------------------------------------|------|--------------------------------------|
| <p>(Pos. 36)</p> <p>This field only applies to Coverage Codes 1, 2, 3, 5, 6, X, and Y. Leave this field blank on all other Coverages Codes. If the liability limits on the policy do not correspond to one of the codes listed below, code the closest per person limit.</p> <p>The following codes do not apply to New Jersey (<i>State code 29</i>) or Pennsylvania (<i>State code 37</i>). Refer to the following pages when coding New Jersey or Pennsylvania experience.</p> | | | |
| BI OR SINGLE LIMIT BI & PD COMBINED | | | |
| <p>These limits apply to Bodily Injury or combined Bodily Injury and Property Damage records only (Coverage Codes 1 or 3). For single limit BI and PD policies, code the BI per person limit.</p> | | | |
| Code | Description | Code | Description |
| | State Statutory Basic Limits through | 4 | \$250,000 / 500,000 |
| 1 | \$25,000/50,000 | 5 | 300,000 / 500,000 |
| 2 | 50,000/100,000 | 6 | 300,000 / 600,000 |
| 3 | 100,000/300,000 | 7 | 500,000 / 1,000,000 |
| | | 8 | 1,000,000 |
| PROPERTY DAMAGE | | | |
| <p>These limits apply to Property Damage records only (Coverage Code 2).</p> | | | |
| Code | State Statutory Basic Limits Through | Code | State Statutory Basic Limits Through |
| 0 | \$5,000 or less | 4 | \$50,000 |
| 1 | 10,000 | 5 | 100,000 |
| 2 | 15,000 | 6 | 250,000 |
| A | 20,000 | 7 | 300,000 |
| 3 | 25,000 | 8 | 500,000 |
| B | 40,000 | | |
| MEDICAL PAYMENTS | | | |
| <p>These limits apply to Medical Payment records only (Coverage Code 5).</p> | | | |
| Code | Limit Per Person | Code | Limit Per Person |
| 1 | \$ 500 | 6 | \$5,000 |
| 2 | 750 | 7 | 10,000 |
| 3 | 1,000 | 8 | 15,000 |
| 4 | 2,000 | 9 | 25,000 & over |
| 5 | 3,000 | | |
| UNINSURED MOTORIST/UNDERINSURED MOTORIST | | | |
| <p>These limits apply to Uninsured/Underinsured records only (Coverage Codes 6, X or Y).</p> | | | |
| Code | Per Person/Per Accident | Code | Per Person/Per Accident |
| 1 | \$5,000/10,000 | 5 | \$50,000/100,000 |
| 2 | 10,000/20,000 | 6 | 100,000/300,000 |
| 3 | 15,000/30,000 | 7 | 300,000/500,000 |
| 4 | 25,000/50,000 | 8 | 1,000,000 |

| LIABILITY LIMITS AMOUNT (NJ) (Pos. 36) | | | |
|--|--------------------------------------|------|--------------------------------------|
| <p>This field only applies to Coverage Codes 1, 2, 3, 6, X, and Y. Leave this field blank on all other Coverages Codes. If the liability limits on the policy do not correspond to one of the codes listed below, code the closest per person limit.</p> <p>The following codes only apply to New Jersey (State code 29). Refer to the following page when coding Pennsylvania experience and the previous page when coding experience for all other states.</p> | | | |
| BODILY INJURY SPLIT LIMIT POLICIES | | | |
| These limits apply to Bodily Injury records only (Coverage Code 1). | | | |
| Code | Description | Code | Description |
| 0 | \$15,000/30,000 | 5 | \$300,000/500,000 |
| 1 | 25,000/50,000 | 6 | 300,000/600,000 |
| 2 | 50,000/100,000 | 7 | 500,000/1,000,000 |
| 3 | 100,000/300,000 | 8 | 1,000,000 |
| 4 | 250,000/500,000 | | |
| PROPERTY DAMAGE | | | |
| These limits apply to Property Damage records only (Coverage Code 2). | | | |
| Code | State Statutory Basic Limits Through | Code | State Statutory Basic Limits Through |
| 0 | \$5,000 or less | 4 | \$50,000 |
| 1 | 10,000 | 5 | 100,000 |
| 2 | 15,000 | 6 | 250,000 |
| A | 20,000 | 7 | 300,000 |
| 3 | 25,000 | 8 | 500,000 |
| B | 40,000 | | |
| UNINSURED MOTORIST/UNDERINSURED MOTORIST SPLIT LIMIT POLICIES | | | |
| These limits apply to Uninsured/Underinsured records (Coverage Code 6). | | | |
| Code | Per Person/Per Accident | Code | Per Person/Per Accident |
| 1 | \$5,000/10,000 | 5 | \$50,000/100,000 |
| 2 | 10,000/20,000 | 6 | 100,000/300,000 |
| 3 | 15,000/30,000 | 9 | 250,000/500,000 |
| 4 | 25,000/50,000 | 7 | 300,000/500,000 |
| | | 8 | 1,000,000 |
| SINGLE LIMIT BI OR SINGLE LIMIT UM/UIM | | | |
| These limits apply to single limits BI and PD records (Coverage Code 3) and single limit Uninsured/Underinsured Motorist records (Coverage Codes 6, X, and Y). | | | |
| Code | Limit | Code | Limit |
| 1 | \$35,000 | 6 | \$300,000 |
| 2 | 50,000 | 7 | 500,000 |
| 4 | 100,000 | | |

| LIABILITY LIMITS AMOUNT (PA) | | | | (Pos. 36) |
|--|--------------------------------------|------|--------------------------------------|-----------|
| <p>If the liability limits on the policy do not correspond to one of the codes listed below, code the closest per person limit.</p> <p>The following codes only apply to Pennsylvania (State code 37). Refer to the previous pages when coding experience for all other states. Refer to the following page for Pennsylvania First Party Benefits (Coverage codes A-G, J-M, P, and R).</p> | | | | |
| BI OR SINGLE LIMIT BI & PD COMBINED | | | | |
| These limits apply to Bodily Injury or combined Bodily Injury and Property Damage records only (Coverage Codes 1 or 3). For single limit BI and PD policies, code the BI per person limit. | | | | |
| Code | Description | Code | Description | |
| 0 | \$ 15,000/ 30,000 | 5 | \$ 300,000 / 500,000 | |
| 1 | 25,000/ 50,000 | 6 | 300,000 / 600,000 | |
| 2 | 50,000/100,000 | 7 | 500,000/1,000,000 | |
| 3 | 100,000/300,000 | 8 | 1,000,000 | |
| 4 | 250,000/500,000 | | | |
| PROPERTY DAMAGE | | | | |
| These limits apply to Property Damage records only (Coverage Code 2). | | | | |
| Code | State Statutory Basic Limits Through | Code | State Statutory Basic Limits Through | |
| 0 | \$ 5,000 or less | 4 | \$ 50,000 | |
| 1 | 10,000 | 5 | 100,000 | |
| 2 | 15,000 | 6 | 250,000 | |
| A | 20,000 | 7 | 300,000 | |
| 3 | 25,000 | 8 | 500,000 | |
| B | 40,000 | | | |
| EXTRAORDINARY MEDICAL PAYMENTS | | | | |
| These limits apply to Extraordinary Medical Payment records only (Coverage Code 5). | | | | |
| Code | Limit Per Person | Code | Limit Per Person | |
| 1 | \$ 100,000 | 3 | \$ 500,000 | |
| 2 | 300,000 | 4 | 1,000,000 | |
| UNINSURED MOTORIST/UNDERINSURED MOTORIST | | | | |
| These limits apply to Uninsured/Underinsured records only (Coverage Codes 6, X and Y). | | | | |
| Code | Per Person/Per Accident | Code | Per Person/Per Accident | |
| 1 | \$ 5,000/10,000 | 5 | \$ 50,000/100,000 | |
| 2 | 10,000/20,000 | 6 | 100,000/300,000 | |
| 3 | 15,000/30,000 | 7 | 300,000/500,000 | |
| 4 | 25,000/50,000 | 8 | 1,000,000 | |

| LIABILITY LIMITS AMOUNT (PA) (Pos. 36) | | | |
|--|-----------------|---|-----------|
| ... Continued from the previous page. The following codes only apply to Pennsylvania (State code 37). Refer to the previous pages when coding experience for all other states. | | | |
| FIRST PARTY BENEFITS | | | |
| Medical Benefits - Use with Coverage Codes A or J. | | Death Benefits - Use with Coverage Codes D or M. | |
| Code | Limits | Code | Limits |
| 1 | \$ 5,000 | 1 | \$ 5,000 |
| 2 | 10,000 | 2 | 10,000 |
| 3 | 25,000 | 3 | 15,000 |
| 4 | 50,000 | 4 | 25,000 |
| 5 | 100,000 | | |
| Medical Benefits plus any Funeral Benefits - Use with Coverage Codes B or K. | | Funeral Benefits - Use with Coverage Codes E or N. | |
| Code | Limits | Code | Limits |
| 1 | \$ 5,000 | 1 | \$ 1,500 |
| 2 | 10,000 | 2 | 2,500 |
| 3 | 25,000 | | |
| 4 | 50,000 | | |
| 5 | 100,000 | | |
| Loss of Income - Use with Coverage Codes C or L. | | Combination First Party Benefits - Use with Coverage Codes F, G, P, or R. | |
| Code | Limits | Code | Limits |
| 1 | \$ 1,000/ 5,000 | 1 | \$ 12,500 |
| 2 | 1,000/15,000 | 2 | 17,500 |
| 3 | 1,500/25,000 | 3 | 50,000 |
| 4 | 2,500/50,000 | 4 | 100,000 |
| | | 5 | 177,500 |
| | | 6 | 200,000 |
| | | 7 | 277,500 |

| DEDUCTIBLE AMOUNT (Pos. 37) | | | |
|---|------------------|------|--------------------|
| This code identifies the deductible amount that applies to the Physical Damage coverages (Coverage Codes 7 and 8). Leave this field blank on all other coverages. | | | |
| Code | Deductible | Code | Deductible |
| 0 | No Deductible | C | \$ 300 Deductible |
| A | \$ 25 Deductible | 5 | \$ 500 Deductible |
| 1 | \$ 50 Deductible | D | \$ 750 Deductible |
| 2 | \$100 Deductible | 6 | \$1,000 Deductible |
| B | \$150 Deductible | 7 | \$1,500 Deductible |
| 3 | \$200 Deductible | 8 | \$2,000 Deductible |
| 4 | \$250 Deductible | 9 | All Other |

| VEHICLE CLASS | | (Pos. 38 — 40) |
|--|--|-----------------------|
| Leave this field blank on Assigned Risks. Classification codes for Assigned Risks are captured in Positions 104-109 (See pages 35-53). | | |
| Code | Body Style | (Pos. 38 — 39) |
| 01 | Sedan (2 or 4 door)* | |
| 02 | Station Wagon | |
| 03 | Convertible | |
| 04 | Vans — Passenger | |
| 05 | Vans — Cargo | |
| 06 | Pick-Up or Panel Truck | |
| 07 | Buses | |
| 08 | Truck (Not including Truck Tractors or Dump Trucks) | |
| 09 | Motor Homes and Auto Homes (self-propelled) | |
| 10 | Campers and Travel Trailers | |
| 11 | Dune Buggies | |
| 12 | All Terrain Vehicles | |
| 13 | Antique Autos | |
| 14 | Amphibious Autos | |
| 15 | Snowmobiles | |
| 16 | Golf Carts | |
| 17 | Motorcycles, Motorscooters, Motorbikes, Trail Bikes and Mopeds | |
| 18 | Named Non-owner | |
| 19 | Sedan 2-door | |
| 20 | Sedan 4-door | |
| 21 | Semitrailer | |
| 22 | Trailer | |
| 23 | Trailer - Service or Utility | |
| 24 | Truck Tractor (Including Semitractors) | |
| 25 | Dump Trucks | |
| 30 | Taxis, Limousines or Van Pools | |
| 99 | All Other | |
| Code | Body Size | (Pos. 40) |
| 1 | Private Passenger | |
| 2 | Sports Car | |
| 3 | Oversized Car or Limousine | |
| 4 | Light Truck (10,000 lbs. or less empty weight) or bus | |
| 5 | Medium Truck (10,001 - 20,000 lbs. empty weight) | |
| 6 | Heavy Truck (20,001 - 45,000 lbs. empty weight) | |
| 7 | Extra Heavy Truck (Over 45,000 lbs. empty weight) | |
| 9 | All Other | |

*Code 01 does not apply to Pennsylvania (*State code 37*). Use codes 19 or 20 to indicate 2-door or 4-door Sedan Body Style for Pennsylvania.

| MODEL YEAR | (Pos. 41 — 42) |
|--|-----------------------|
| <p>Code the last two digits of the model year of the insured vehicle.</p> <p>Leave this field blank on Commercial Automobile Classification Codes 5 (Garage risks), 7 (Public - taxicabs, public livery and public buses) and 9 (All other). Also, leave this field blank on all fleets of vehicles.</p> | |

| UNINSURED/UNDERINSURED MOTORIST | | (Pos. 43) |
|---|---|------------------|
| <p>This code identifies the type of coverages provided for Uninsured/Underinsured Motorists (Coverage Codes 6, X or Y only). Leave this field blank on all other coverages.</p> | | |
| Other than Pennsylvania: | | |
| Code | Description | |
| 1 | Bodily Injury | |
| 2 | Property Damage | |
| 3 | Bodily Injury and Property Damage | |
| Pennsylvania Only (37): | | |
| 1 | Bodily Injury — no stacking of UM/UIM limits | |
| 2 | Property Damage — no stacking of UM/UIM limits | |
| 3 | Bodily Injury and Property Damage — no stacking of UM/UIM limits | |
| 4 | Bodily Injury — stacked multi-car UM/UIM limits | |
| 5 | Property Damage — stacked multi-car UM/UIM limits | |
| 6 | Bodily Injury and Property Damage — stacked multi-car UM/UIM limits | |

| EXPOSURE | (Pos. 44 — 48) (P) |
|--|---------------------------|
| <p>Enter the actual number of vehicles covered by the premium posted in the statistical record. Usually this will be one, although it is possible for the same coverage to be provided in the same policy on more than one vehicle, in which case the Exposure entry would be the number of vehicles covered under the coding entry.</p> <p>Exposure follows the same rules as the Premium Amount field for negative amounts. In other words, the sign of the Exposure field should always match the sign of the Premium Amount field.</p> <p>Coverage Code 9 records must be reported with no exposure.</p> <p>Companies reporting garage risks must report exposure in per \$100 of payroll.</p> <p>Important: The exposure on Assigned Risks is the number of vehicles unless otherwise stated. If the exposure basis is "No Exposure" then enter all zeros in this field.</p> | |

CLAIM COUNT**(Pos 44 — 48) (L)**

This field records the actual number of new claims reported in a given reporting period. The rules for negative counts are the same as those for the Exposure field.

The claim count on a paid loss record should be 1 **only** when the first payment is made **provided no reserve had been established in a previous quarter**. All subsequent paid loss and outstanding loss records for this claim must carry a Claim Count of 0. However, in the event that a reserve is set up first (ie. no payments are made in the quarter or have been made in a previous quarter), the outstanding loss record for the period must carry a Claim Count of 1. All subsequent paid and outstanding loss records for this claim must carry a Claim Count of 0.

Since loss coding follows that of premiums, it is likely that some claims will affect two or more coverages. In such cases, each separate coverage must carry a claim count of 1 the first time it is reported. Again, any additional loss record for a previously reported coverage must have a Claim Count of 0.

Paid and outstanding allocated loss adjustment expenses are reported for Automobile Liability, Coverage Codes 1, 2 or 3 only. The claim count on paid and outstanding allocated loss adjustment expense records is always zero. A claim which involves only loss adjustment expenses or the cost of a bail bond, etc., should **not** be counted and a 0 should be entered for the Claim Count.

Paid loss records representing salvage or subrogation recoveries should carry a Claim Count of 0 unless the entire paid loss amount has been recovered. In which case, the record should carry a Claim Count of -1 and should be reported in the period in which the recovery occurs regardless of when the loss occurred.

If an outstanding loss record is reported for a claim with a claim count of 1, and the claim is later closed without payment, then a zero dollar outstanding loss record (Transaction Code 3) is required, with a claim count of -1.

MONTHS COVERED**(Pos. 49 — 50) (P)**

For premium transactions, this code reflects the number of months of coverage provide by the reported premium.

For cancellations, this field reflects the number of months remaining on the policy.

For example:

| Sample Codes | Months Covered |
|--------------|-----------------|
| 01 | 1 Month or Less |
| 02 | 2 Months |
| 06 | 6 Months |
| 12 | 1 Year |

| CAUSE OF LOSS | | | (Pos. 49) (L) |
|---|--|---|---------------|
| Code this field for Transaction Codes 2, 3, 6 and 7 only. This code separates all losses into their component coverage parts. | | | |
| Code | Description | Coverage | |
| 1 2 | Bodily Injury Death Limit Claim (New York only) | Liability — BI (1) | |
| 2 | Property Damage | Liability — PD (2) | |
| 1 2 | Bodily Injury Property Damage | Liability — BI & PD Combined (3) | |
| 1 2 3 4 5 6 8 9 | Medical Expenses — Basic Loss of Income — Basic Survivor's Benefits — Basic Funeral Expenses — Basic Medical Expenses — Excess Loss of Income — Excess All Other — Excess All Other — Basic | Personal Injury Protection (4) - does not apply to Pennsylvania | |
| 1 | Medical Payments | Medical Payments / Extraordinary Medical Payments (5) | |
| 1 2 5 6 7 8 | Bodily Injury Property Damage Statutory Coverage (Risk & Accident State = NY): Other than death limit claims (New York only) Death limit claims (New York only) Voluntary Coverage (Risk state = NY) (NY only) All Other | Uninsured Motorists (6 or X) | |
| 3 4 9 | Bodily Injury Property Damage All Other | Underinsured Motorists (6 or Y) | |
| 1 | Collision | Physical Damage — Collision (7) | |
| 0 1 2 3 4 5 6 7 8 9 | Personal Effects Fire Theft Vandalism Glass Breakage Wind and Hail Earthquake Water Towing and Labor or Other Transportation All Other | Physical Damage — Other Than Collision (8 or T) | |
| 1 2 3 4 | Medical Expenses Loss of Income Survivor's Benefits Funeral Expenses | First Party Benefits Coverage — (A, B, C, D, E, F, G, J, K, L, M, N, P, and R) | |
| 9 | Any Cause of Loss for Coverage Code 9 Any Cause of Loss for Coverage Codes H, W, and Z | All Other (9) Terrorism (H, W, and Z) | |

| TERRORISM INDICATOR | | (Pos. 51) |
|--|--|------------------|
| <p>This field indicates whether certified acts of terrorism are included or excluded and must be reported on all premium and loss records associated with a commercial automobile policy (subline code 2).</p> <p>For personal automobile policies (subline code 1), leave this field blank.</p> | | |
| Code | Description | |
| 7 | Certified acts of terrorism not excluded | |
| 8 | Certified acts of terrorism excluded | |

| SINGLE/MULTI-CAR (Pos. 56) (P) | |
|---------------------------------------|--------------------|
| Code | Description |
| 1 | Single Car Rated |
| 2 | Multi-Car Discount |
| 9 | Not Applicable |

| ACCIDENT DATE (Pos. 56 — 59) (L) | |
|--|----------------------|
| Accident Date is required on all loss transactions. Code the actual date of loss using the coding procedure shown in the following examples: | |
| Sample Code | Accident Date |
| 0189 | January 20, 1989 |
| 1192 | November 1, 1992 |
| 1294 | December 15, 1994 |

| PACKAGE CODE (Pos. 64) | |
|---|---|
| This code identifies automobile coverage written as an endorsement to a policy for another line of insurance. | |
| Code | Description |
| 0 | Auto coverage written as a separate policy and not an endorsement to another policy. |
| 7 | Auto coverage written as an endorsement to a CMP, CPP or BOP policy. |
| 9 | Auto coverage written as an endorsement to any other type of policy. |

| POOL AFFILIATION (Pos. 65) | |
|---|---|
| This code identifies business written in a pool such as an assigned risk facility or joint underwriting association, and business not written in a pool. | |
| Code | Description |
| 1 | Preferred Risk |
| 3 | Standard risk not written in a pool, JUA or assigned risk facility, etc., and not shared with another company. |
| 4 | Standard risk written in a pool, JUA or assigned risk facility, etc. |
| 5 | Substandard risk not written in a pool, JUA or assigned risk facility, etc., and not shared with another company. |
| 6 | Substandard risk written in a pool, JUA or assigned risk facility, etc. |
| 8 | Servicing carrier |

| OCCURRENCE OR POLICY IDENTIFICATION (Pos. 66 — 79) |
|---|
| Premium Records (Transaction Code 1) should contain the policy number only. It must be unique to a particular policy, and must be the same on all records associated with a particular policy. |
| NOTE: Do not include sequence numbers in the Occurrence or Policy Identification field. The Reserved for Company Use field (Pos. 140-150) may be used to report sequence numbers. |
| On loss records (Transaction Codes 2, 3, 6 or 7), code the actual claim number in Positions 66-77. This number must be the same for all claims that arise from a single occurrence regardless of the cause of loss. Positions 78-79 will be used as a Claim Identifier to distinguish multiple claims that arise from a single occurrence. |
| Any combination of letters, digits and blanks may be used in the occurrence identifier or the claim identifier. |
| Policy numbers and Occurrence Identification Numbers must be left justified. |

| NC PROGRAM ENHANCEMENT INDICATOR (Pos. 80) | |
|--|-----------------------------|
| This code applies in North Carolina only. Based on North Carolina Session 2015 House Bill 288, premiums and losses resulting from program enhancements must not comeingle with basic data. This code indicates the use of enhanced endorsements. | |
| For states other than North Carolina, leave this field blank. | |
| Code | Description |
| 0 | Not an enhanced endorsement |
| 1 | Enhanced endorsement |

| ZIP CODE | | (Pos. 81 — 85) |
|--|--|-----------------------|
| On both premium and loss records, enter the actual five digit ZIP Code for the location where the vehicle is principally garaged. For commercial policies where the state in which the vehicle is principally garaged or kept is unknown or varies during the year, code the ZIP Code in which the policy was written. | | |
| ZIP CODE SUFFIX (OPTIONAL) | | (Pos. 86 — 89) |
| The ZIP Code suffix may be coded if known. In order to avoid additional programming in the future, companies may want to allow for the additional 4-digit suffix on the ZIP Code. | | |

| UM/UIM STACKING INDICATOR | | (Pos. 90) |
|--|---|------------------|
| This code indicates whether the Uninsured Motorists (Coverage Code X), Underinsured Motorists (Coverage Code Y), or the combined Uninsured/Underinsured Motorists (Coverage Code 6) Coverages are rated per policy (non-stacked) or per vehicle (stacked). | | |
| When reporting any Coverage Code other than 6, X, and Y, leave this field blank. | | |
| Code | Description | |
| 1 | UM and/or UIM limits stacked (per vehicle) | |
| 2 | UM and/or UIM limits non-stacked (per policy) | |

| SYMBOL CODE | | | | (Pos. 91 — 92) |
|---|--|------------------|------------------|----------------|
| This field is required for all Private Passenger automobiles (Subline 1). | | | | |
| Enter the Symbol Code on all Physical Damage records. On all other coverages, either leave this field blank or enter the same code that was reported on the Physical Damage record. | | | | |
| Leave this field blank on all automobiles principally garaged or kept in Puerto Rico and on all Commercial Automobiles (Subline 2). | | | | |
| COST NEW - CARS BUILT PRIOR TO 1990 | | | | |
| Code | Cars Built Prior to 1975 | 1976 - 1980 Cars | 1981 - 1989 Cars | |
| 01 | \$ 0 - 1,600 | \$ 0 - 1,600 | \$ 0 - 1,600 | |
| 02 | 1,601 - 2,100 | 1,601 - 2,100 | 1,601 - 2,100 | |
| 03 | 2,101 - 2,750 | 2,101 - 2,750 | 2,101 - 2,750 | |
| 04 | 2,751 - 3,700 | 2,751 - 3,700 | 2,751 - 3,700 | |
| 05 | 3,701 - 5,000 | 3,701 - 5,000 | 3,701 - 5,000 | |
| 06 | 5,001 - 6,500 | 5,001 - 6,500 | 5,001 - 6,500 | |
| 07 | 6,501 & Above | 6,501 - 8,000 | 6,501 - 8,000 | |
| 08 | | 8,001 - 10,000 | 8,001 - 10,000 | |
| 09 | Pick-ups, vans, and panel trucks not assigned a symbol code in the private passenger section of the rating manual. | | | |
| 10 | | 10,001 - 12,500 | 10,001 - 12,500 | |
| 11 | | 12,501 - 15,000 | 12,501 - 15,000 | |
| 12 | | 15,001 - 17,500 | 15,001 - 17,500 | |
| 13 | | 17,501 - 20,000 | 17,501 - 20,000 | |
| 14 | | 20,001 & Above | 20,001 - 24,000 | |
| 15 | | | 24,001 - 28,000 | |
| 16 | | | 28,001 - 33,000 | |
| 17 | | | 33,001 - 39,000 | |
| 18 | | | 39,001 - 46,000 | |
| 19 | | | 46,001 - 55,000 | |
| 20 | | | 55,001 - 65,000 | |
| 21 | | | 65,001 & Above | |

NOTE: For Model Year 1990 and later, refer to the Symbol Code table on page 28.

| SYMBOL CODE (cont.) | | (Pos. 91 — 92) | |
|---|--|----------------|-----------------|
| This field is required for all Private Passenger automobiles (Subline 1). | | | |
| Enter the Symbol Code on all Physical Damage records. On all other coverages, either leave this field blank or enter the same code that was reported on the Physical Damage record. | | | |
| Leave this field blank on all automobiles principally garaged or kept in Puerto Rico and on all Commercial Automobiles (Subline 2). | | | |
| 1990 AND LATER CARS | | | |
| Code | Cost New | Code | Cost New |
| 01 | \$ 0 - 6,500 | 15 | 22,001 - 24,000 |
| 02 | 6,501 - 8,000 | 16 | 24,001 - 26,000 |
| 03 | 8,001 - 9,000 | 17 | 26,001 - 28,000 |
| 04 | 9,001 - 10,000 | 18 | 28,001 - 30,000 |
| 05 | 10,001 - 11,250 | 19 | 30,001 - 33,000 |
| 06 | 11,251 - 12,500 | 20 | 33,001 - 36,000 |
| 07 | 12,501 - 13,750 | 21 | 36,001 - 40,000 |
| 08 | 13,751 - 15,000 | 22 | 40,001 - 45,000 |
| 10 | 15,001 - 16,250 | 23 | 45,001 - 50,000 |
| 11 | 16,251 - 17,500 | 24 | 50,001 - 60,000 |
| 12 | 17,501 - 18,750 | 25 | 60,001 - 70,000 |
| 13 | 18,751 - 20,000 | 26 | 70,001 - 80,000 |
| 14 | 20,001 - 22,000 | 27 | 80,001 & Above |
| 09 | Pick-ups, vans, and panel trucks not assigned a symbol code in the private passenger section of the rating manual. | | |

| PASSIVE RESTRAINT DISCOUNT CODE (Pos. 93) | |
|--|--|
| <p>This field identifies any passive restraint discounts. Coverages that have been discounted for a passive restraint system should use Passive Restraint Discount Codes 1-5. If the vehicle is equipped with a passive restraint system but the specific coverage did not receive a discount, code this field 9 - "Not Applicable".</p> <p>Coverages that do not offer a passive restraint discount should be coded 9 - "Not Applicable". If a discount is offered but the vehicle does not qualify for the discount, then code this field 6 - "Vehicles with No Passive Restraint System".</p> | |
| Code | Description |
| 1 | Air Bags for both front seat occupants. |
| 2 | Air Bag for the driver only — No passenger belt passive restraint. |
| 3 | Air Bag for the driver only — With passenger belt passive restraint. |
| 4 | Belt Passive Restraint System for both front seat occupants. |
| 5 | Belt Passive Restraint System for the driver only. |
| 6 | Vehicles with No Passive Restraint System. |
| 9 | Not Applicable |

| ANTI-LOCK BRAKES DISCOUNT CODE (Pos. 94) | |
|---|--|
| This code identifies those coverages that receive an Anti-Lock Braking System discount. | |
| Code | Description |
| 1 | Anti-Lock Braking System discount applied to this coverage. |
| 2 | Program offers an Anti-Lock Braking System discount on this coverage, but the vehicle does not qualify for the discount. |
| 9 | Not Applicable -Program does not offer an Anti-Lock Braking System discount on this coverage. |

| ANTI-THEFT DEVICE DISCOUNT CODE | | (Pos. 95 — 96) |
|---|--|----------------|
| Only code this field on Comprehensive Physical Damage records — Coverage Code 8. If the vehicle has an anti-theft device but did not receive a discount, then the Anti-Theft Device Discount Code should be 99. | | |
| Other than New York and New Jersey | | |
| Code | Description | |
| 01 | Vehicles with no discount but rated under a discount program | |
| 02 | Vehicles with alarm only — with discount | |
| 03 | Vehicles with active devices — with discount | |
| 04 | Vehicles with passive devices — with discount | |
| 05 | Vehicles with an alarm and an active device — with discount | |
| 06 | Vehicles with an alarm and a passive device — with discount | |
| 99 | All other (Vehicles not rated under a discount program) | |
| New York Only (31) | | |
| 01 | Vehicles with no discount | |
| 02 | Vehicles with alarm only — with discount | |
| 03 | Vehicles with active devices — with discount | |
| 04 | Vehicles with passive devices — with discount | |
| 09 | Vehicles with electronic homing devices only — with discount | |
| 10 | Vehicles with VIN etched window glass only — with discount | |
| | Vehicles with multiple anti-theft device discounts: | |
| 11 | With discount less than the maximum reduction of 25% per vehicle | |
| 12 | With discount equal to the maximum reduction of 25% per vehicle | |
| New Jersey Only (29) | | |
| 01 | Vehicle qualifies for discount under Category I | |
| 02 | Vehicle qualifies for discount under Category II | |
| 03 | Vehicle qualifies for discount under Category III | |
| 04 | Vehicle qualifies for discount under Category IV | |
| 05 | Vehicle qualifies for discount under Category III and IV | |
| 09 | Vehicle without an anti-theft device (no discount) | |
| DEFINITIONS | | |
| Alarm: An audible alarm that can be heard at a distance of at least 300 feet for a minimum of three minutes. | | |
| Active or Passive Devices: Devices which disable the vehicle by making the fuel, ignition or starting systems inoperative. A device is active if a separate manual step is required to engage the device. A device is passive if a separate manual step is not required to engage the device. | | |

| DEFENSIVE DRIVER DISCOUNT CODE (Pos. 97) | |
|--|---|
| This code identifies those coverages that receive a Defensive Driver Discount or an Accident Prevention Course Discount. | |
| Code | Description |
| 1 | Defensive driver discount applied to this coverage. |
| 2 | Driver does not qualify for the defensive driver discount available on this coverage. |
| 9 | Not Applicable - Program does not offer a defensive driver discount on this coverage. |

| PIP LIMITS/DEDUCTIBLE CODE | | (Pos. 98) |
|--|---|-----------|
| This field only applies to Personal Injury Protection records (Coverage Code 4). Leave this field blank on all other coverages. See the following page for New Jersey (<i>State code 29</i>) PIP Limits/Deductible Code. | | |
| All No-Fault States Except Michigan, New Jersey, and New York: | | |
| Code | Description | |
| 1 | Basic PIP coverage — No deductible | |
| 2 | Basic PIP coverage — Deductible applies | |
| 3 | Basic and additional PIP — No deductible | |
| 4 | Basic and additional PIP — Deductible applies | |
| Michigan (21) | | |
| Income \$5,000 and Over (Excluding Motorcycle Buy Back) | | |
| 1 | Full coverage without dependents reduction | |
| 2 | Full coverage with dependents reduction | |
| 3 | \$300 deductible without dependents reduction | |
| 4 | \$300 deductible with dependents reduction | |
| Income Less Than \$5,000 (Excluding Motorcycle Buy Back) | | |
| 5 | Full coverage without dependents reduction | |
| 6 | Full coverage with dependents reduction | |
| 7 | \$300 deductible without dependents reduction | |
| 8 | \$300 deductible with dependents reduction | |
| 9 | All other PIP coverages (including motorcycle buy back) | |
| New York (31) | | |
| 1 | Basic PIP coverage — No deductible | |
| 2 | Basic and additional PIP — No deductible | |
| 3 | \$200 deductible | |
| 4 | \$100 deductible | |
| 5 | All Other deductibles | |

| NEW JERSEY PIP LIMITS/DEDUCTIBLE CODE (Pos. 98 — 99) | | |
|--|--------------------------------|--|
| This field only applies to New Jersey (<i>State code 29</i>). Refer to the previous page for PIP Limits/Deductible codes for states other than New Jersey. | | |
| LIMIT | CODE | |
| Basic PIP coverage only - No added PIP coverage | 01 | |
| Basic PIP coverage - Medical expenses only | 25 | |
| PIP coverage for pedestrian only | 26 | |
| Limit | Code | |
| | Named Insured Including Spouse | Named Insured and One or More Resident Relatives |
| Added PIP coverage - One or two cars | | |
| Basic PIP coverage with Option 1 | 02 | 30 |
| Basic PIP coverage with Option 2 | 03 | 31 |
| Basic PIP coverage with Option 3 | 04 | 32 |
| Basic PIP coverage with Option 4 | 05 | 33 |
| Basic PIP coverage with Option 5 | 06 | 34 |
| Basic PIP coverage with Option 6 | 10 | 35 |
| Basic PIP coverage with Option 7 | 11 | 36 |
| Basic PIP coverage with Option 8 | 12 | 37 |
| Basic PIP coverage with Option 9 | 13 | 38 |
| Basic PIP coverage with Option 10 | 14 | 39 |
| Basic PIP coverage with Option 11 | 15 | 40 |
| Basic PIP coverage with Option 12 | 16 | 41 |
| Basic PIP coverage with Option 13 | 17 | 42 |
| Basic PIP coverage with Option 14 | 18 | 43 |
| Basic PIP coverage with Option 15 | 19 | 44 |
| Basic PIP coverage with Option 16 | 20 | 45 |
| All Other | 09 | 09 |
| Basic PIP Coverage with any Optional Coverage | | |
| Three or more cars | 07 | 07 |
| Named insured including spouse and resident relatives (if applicable) and other named insureds - Single or multi-car risks | 08 | 08 |

| NEW JERSEY DEDUCTIBLE (Pos. 100) | |
|--|------|
| This field only applies to New Jersey (<i>State code 29</i>). Leave this field blank for all other states. | |
| Medical Expenses Deductible Amount | Code |
| \$ 250 | 5 |
| \$ 500 | 2 |
| \$1000 | 3 |
| \$2500 | 4 |
| All Other | 9 |

RATING/TERMINAL ZONE CODE**(Pos. 101 — 103)**

This code only applies to commercial trucks (greater than 10,000 lbs. empty weight), tractors and trailers which regularly operate beyond a 200 mile radius from the address where the vehicle is principally garaged. The Rating Zone Code is the place of principal garaging and the Terminal Zone Code is the farthest zone into which the vehicle operates. Code 000 if this field does not apply.

| Rating Zone Code (Pos. 101) | Zone | Terminal Zone Code (Pos. 102-103) | Rating Zone Code (Pos. 101) | Zone | Terminal Zone Code (Pos. 102-103) |
|---|----------------------|---|---|----------------|---|
| 1 | Atlanta | 01 | 1 | New Orleans | 25 |
| 4 | Baltimore/Washington | 02 | 3 | New York City | 26 |
| 2 | Boston | 03 | 4 | Oklahoma City | 27 |
| 1 | Buffalo | 04 | 4 | Omaha | 28 |
| 2 | Charlotte | 05 | 2 | Phoenix | 29 |
| 1 | Chicago | 06 | 4 | Philadelphia | 30 |
| 2 | Cincinnati | 07 | 3 | Pittsburgh | 31 |
| 3 | Cleveland | 08 | 2 | Portland | 32 |
| 1 | Dallas/Fort Worth | 09 | 5 | Richmond | 33 |
| 1 | Denver | 10 | 5 | St. Louis | 34 |
| 4 | Detroit | 11 | 3 | Salt Lake City | 35 |
| 1 | Hartford | 12 | 3 | San Francisco | 36 |
| 2 | Houston | 13 | 5 | Tulsa | 37 |
| 5 | Indianapolis | 14 | 9 | Pacific Coast | 40 |
| 3 | Jacksonville | 15 | 9 | Mountain | 41 |
| 1 | Kansas City | 16 | 9 | Midwest | 42 |
| 2 | Little Rock | 17 | 9 | Southwest | 43 |
| 1 | Los Angeles | 18 | 9 | North Central | 44 |
| 4 | Louisville | 19 | 9 | Mideast | 45 |
| 2 | Memphis | 20 | 9 | Gulf | 46 |
| 4 | Miami | 21 | 9 | Southeast | 47 |
| 2 | Milwaukee | 22 | 9 | Eastern | 48 |
| 3 | Minneapolis-St. Paul | 23 | 9 | New England | 49 |
| 3 | Nashville | 24 | 9 | Alaska | 50 |

Zone Definitions can be found on the following page:

ZONE DEFINITIONS

ATLANTA: Clayton and Cobb Counties and Atlanta, Georgia territories.

BALTIMORE/WASHINGTON: Baltimore, Baltimore Suburban & Outer Suburban, Montgomery County Suburban & Outer Suburban, and Prince Georges County Suburban & Outer Suburban, Maryland territories; the entire District of Columbia; and Alexandria City, Arlington, Falls Church City & Arlington-Alexandria Suburban, Virginia territories

BOSTON: Essex, Middlesex, Norfolk and Suffolk, Massachusetts Counties.

BUFFALO: Erie County (Balance), Buffalo, Buffalo Semi-Suburban, Buffalo Suburban, Niagara Falls Suburban, New York territories.

CHARLOTTE: Charlotte and all of Mecklenburg County, North Carolina territories.

CHICAGO: All of Cook and Du Page County territories, Lake County (Balance), Waukegan-North Chicago and all Chicago, Illinois territories; and East Chicago, Indiana territory.

CINCINNATI: Cincinnati, Dayton and Hamilton-Middletown, Ohio; and Covington-Newport, Kentucky territories.

CLEVELAND: Geauga, Lorain and Medina County territories, Portage County (excluding the village of Mogadore), all Cleveland and Painesville, Ohio territories.

DALLAS-FORT WORTH: Dallas and Tarrant, Texas Counties.

DENVER: Denver and North Central, Colorado territories.

DETROIT: Detroit, Dearborn and Pontiac, Michigan territories.

HARTFORD, CT: Hartford and New Haven Counties, and Bridgeport and Fairfield-Stratford.

HOUSTON: Chambers, Galveston and Harris, Texas Counties.

INDIANAPOLIS: Marion County, Indiana territory.

JACKSONVILLE: Jacksonville, Florida territory.

KANSAS CITY: Kansas City, Kansas; and Independence and all Kansas City, Missouri territories.

LITTLE ROCK: Pulaski County, Arkansas territory.

LOS ANGELES, CA: Los Angeles and Orange Counties and also Riverside and San Bernardino.

LOUISVILLE: Jefferson County, Kentucky and New Albany and Jeffersonville, Indiana territories.

MEMPHIS: Shelby County, Tennessee territory.

MIAMI: Miami & Miami Beach, Florida territories.

MILWAUKEE, WI: Kenosha; Milwaukee

Metropolitan, Semi-Suburban and Suburban and Racine.

MINNEAPOLIS-ST. PAUL: Minneapolis Metropolitan and Suburban; and St. Paul Metropolitan & Suburban, Minnesota territories.

NASHVILLE: Davidson County, Tennessee terr.

NEW ORLEANS: New Orleans, Louisiana territory.

NEW YORK CITY: New York City, Nassau and Westchester, New York Counties; all of Bergen, Essex and Hudson Counties, Elizabeth, New Brunswick, Perth Amboy and Plainfield, New Jersey territories; and Darien-Greenwich and Stamford, Connecticut territories.

OKLAHOMA CITY: Oklahoma County, Oklahoma territory.

OMAHA: Douglas and Sarpi, Nebraska Counties and Council Bluffs, Iowa territory.

PHOENIX, AZ: Mesa-Tempe and Phoenix.

PHILADELPHIA: Balance of Bucks, Chester, Delaware, & Montgomery Counties; All of Allentown-Bethlehem and Philadelphia, Pennsylvania territories; Wilmington, Delaware and Camden, Camden Suburban and Trenton, New Jersey territories.

PITTSBURGH: Alleghany and Beaver Counties, Pennsylvania territories.

PORTLAND: Portland, Portland Semi-Suburban and Portland Suburban, Oregon and Vancouver, Washington territories.

RICHMOND: Richmond, Virginia territory.

ST. LOUIS: St. Louis County, Missouri, and East St. Louis, Illinois territories.

SALT LAKE CITY: Salt Lake City County, Utah territory.

SAN FRANCISCO: Alameda, Contra Costa, Marin, San Francisco, San Mateo and Santa Clara, California Counties.

TULSA: Tulsa, Oklahoma territory.

PACIFIC COAST: Balance of CA, OR and WA.

MOUNTAIN: Balance of AZ, CO, ID, MT, NM, NV, UT and WY.

MIDWEST: Balance of IA, KS, MN, MO, NE, ND, SD and WI.

SOUTHWEST: Balance of AR, OK and TX.

NORTH CENTRAL: Balance of IL, IN, MI, & OH.

MIDEAST: Balance of KY, TN and WV.

GULF: Balance of AL, LA and MS.

SOUTHEAST: Balance of FL, GA, NC, SC & VA.

EASTERN: Balance of DE, MD, NJ, NY and PA.

NEW ENGLAND: Balance of CT, MA, ME, NH, RI and VT

ASSIGNED RISKS CODING

FOR THE AUTOMOBILE STATISTICAL PLAN

The fields in this section collect additional information on assigned risk records. **These fields are required for assigned risks only.** For all voluntary business, proceed to the STATE EXCEPTION CODING section (page 55) and leave these fields blank.

This Assigned Risk Section consists of a Classification Code field and an Experience Rating Modification Factor field. Use the index below to locate the applicable Classification Coding Section.
The Experience Rating Modification Factor field can be found on page 54.

Private Passenger Vehicles

| | |
|--|-------|
| 1. Private Passenger Automobiles | 36-38 |
| 2. Private Passenger Motorcycles, Motor Scooters, etc. | |
| Other than Physical Damage | 39 |
| Physical Damage | 39 |
| 3. Excess Indemnity Policies - Non-Fleet (New York Only) | 40 |

Commercial Vehicles

| | |
|---|-------|
| 4. Commercial Trucks, Tractors, and Trailers | |
| Other than Physical Damage | 41-42 |
| Physical Damage | 43 |
| 5. Publics | |
| Other than Physical Damage | 44-45 |
| Physical Damage | 45 |
| 6. Garages Liability | 46 |
| 7. Private Passenger Types | |
| Other than Physical Damage | 47 |
| Physical Damage | 47 |
| 8. Transportation of Migrant Workers | 47 |
| 9. Non-Owned Automobiles | |
| Other than Physical Damage | 48 |
| Physical Damage | 48 |
| 10. Composite Rating Plan | 49 |
| 11. Excess Indemnity Policies (New York Only) | 49 |
| 12. All Other Classifications | |
| Other than Physical Damage | 50-51 |
| Physical Damage | 51 |

1. Private Passenger Non-Fleet Only

The 6-digit Assigned Risk Classification Code for Private Passenger Non-Fleet business is made up of a 4-digit Rate Class Code (Pos. 104—107) and a 2-digit Penalty Points/Percent of Surcharge Code (Pos. 108—109). The coding instructions for these two sections are shown below.

| RATE CLASS CODE | (Pos. 104—107) |
|--|-----------------------|
| Option 1 - Report the ISO 4-digit numeric statistical rate class code (1111, 1121, etc.) in Positions 104—107. | |
| Option 2 - Report the 1, 2, 3, or 4-digit alphanumeric rating plan class code as listed in the assigned risk manual. Left justify the rating plan class code (1A, 1AF, 3, 4AFS, etc.) and leave any unused positions blank. | |

| PENALTY POINTS/PERCENT OF SURCHARGE CODE (Pos. 108—109) | |
|---|--|
| All states except Arkansas, Florida, New York, Pennsylvania and Texas: | |
| Unless specific codes apply (see below), report the actual number of penalty points up through 50 points. Report code 99 when there are more than 50 penalty points. For example: | |
| Code | Description |
| 00 | 0 penalty points without a careful driver credit. |
| 87 | 0 penalty points with a careful driver credit. |
| 01 — 50 | 1 to 50 penalty points |
| 99 | 51 or more penalty points |
| Realignment of Penalty Points: Mississippi, Missouri, North Dakota, Ohio, South Dakota, Washington and West Virginia: | |
| 81 | Any vehicle which is part of a multi-car risk and which penalty points are realigned and are subject to an additional charge |
| Other Special State Codes: | |
| 87 | Rhode Island - Careful Driver Credit Only: No penalty points |
| 88 | One speeding conviction, no other assignable points |
| 82 | One moving violation, no other assignable points |
| 83 | One conviction for operating a motor vehicle without state authority, no other assignable points |
| 89 | Inexperienced operator, no penalty points |
| 87 | Virginia - Careful Driver Credit Only: No penalty points |
| 86 | Risks with penalty points |
| 80 | Kansas - Risks without Careful Driver Credit: Inexperienced operators, accident and conviction free |

1. Private Passenger Non-Fleet Only (cont.)

| PENALTY POINTS/SURCHARGE CODE - ARKANSAS (03) | | |
|---|--|---|
| Number of Penalty Points | Code | |
| | Principal Operators Age 65 and Over with Defensive Driver Credit | Other than Principal Operators Age 65 and Over with Defensive Driver Credit |
| 0 | 01 | 00 |
| 1 | 11 | 10 |
| 2 | 21 | 20 |
| 3 | 31 | 30 |
| 4 | 41 | 40 |
| 5 | 51 | 50 |
| 6 | 61 | 60 |
| 7 or more | 71 | 70 |
| Realigned penalty points (This code is to be used to identify vehicles under a multi-car risk to which penalty points are realigned and are subject to an additional charge.) | | 81 |

| PENALTY POINTS/SURCHARGE CODE - FLORIDA (09) | |
|--|--|
| Code | Description |
| — | 0 Penalty Points |
| 06 | 0 Penalty Points — 36 months record free |
| 07 | 0 Penalty Points — 48 months record free |
| 08 | 0 Penalty Points — 60 months record free |
| 14 | 1 Penalty Point |
| 24 | 2 Penalty Points |
| 34 | 3 Penalty Points |
| 44 | 4 Penalty Points |
| 54 | 5 Penalty Points |
| 64 | 6 Penalty Points |
| 74 | 7 or more Penalty Points — Single Car Risk |
| 74 | 7 or More Penalty Points — Multi Car Risk |
| 81 | Realigned Penalty Points (This code to be used only to identify vehicles under multi-car risks to which penalty points are realigned as a result of accumulation of penalty points in excess of 12 and are subject to an additional charge of 10% per point.) |
| 04 | 0 Penalty Points This code to be used only to identify vehicles: <ul style="list-style-type: none"> • for which an SR-22 certificate is required and are not eligible for Careful Driver Credit OR <ul style="list-style-type: none"> • no points are assigned and such vehicles are not eligible for Careful Driver Credit |

1.Private Passenger Non-Fleet Only (cont.)

| PENALTY POINTS/PERCENT OF SURCHARGE - NEW YORK (31) | | | | | | | |
|---|--|---|-------------------------------|--|--|-------------------------------|-----------------------------------|
| No Penalty Points | | | | | | | |
| Code | Description | | | Code | Description | | |
| 91 | Accident and Conviction Free For: 3 years 4 years 5 years 6 or more years | | | 92 | Inexperienced Operator: Licensed 1 year or less. | | |
| 94 | | | | 93 | | | |
| 95 | | | | Licensed more than 1 year but less than 3 years. | | | |
| 96 | | | | | | | |
| One or More Penalty Points | | | | | | | |
| Numb of Penal Point | Points Resulting From: | | | | | | |
| | Realign Penalty Points* | Combination of Accident(s) & Convictions | Accident(s) Only | | More Than One Convictio | One Conviction Only | |
| | | | Inex- perience Operator | No Inex- perienced Operator | | Inex- perience Operator | No Inex- perienced Operator |
| 1 | 13 | -- | -- | -- | -- | -- | -- |
| 2 | 23 | -- | 28 | 27 | 26 | 25 | 24 |
| 3 | 33 | -- | -- | -- | -- | 35 | 34 |
| 4 | 43 | 49 | 48 | 47 | 46 | -- | -- |
| 5 | 53 | 59 | -- | -- | 56 | 55 | 54 |
| 6 | 63 | 69 | 68 | 67 | 66 | 65 | 64 |
| 7+ | 73 | 79 | 78 | 77 | 76 | -- | -- |
| Base rates | - | 70 | 70 | 70 | 70 | 70 | 70 |

*These codes are used to identify multi-car risk vehicles to which penalty points are realigned because of accumulation of points in excess of 12.

| PENALTY POINTS/PERCENT OF SURCHARGE - PENNSYLVANIA (37) | |
|---|--|
| Code | Description |
| 60 | CLEAN RISKS: Zero Penalty Points |
| 61 | One Penalty Point |
| 62 | Two Penalty Points |
| 63 | Three Penalty Points |
| 70 | OTHER THAN CLEAN RISKS: Zero Penalty Points |
| 71 | One Penalty Point |
| 72 | Two Penalty Points |
| 73 | Three Penalty Points |
| 74 | Four or More Penalty Points |

2. Private Passenger Motorcycles, Motor Scooters, etc.

Liability Records

| All States Except Florida, Maine, Nebraska, New York and Tennessee: | | |
|--|------------------------------|-----------|
| Size of Engine | Operator Under Age 25 or 30* | All Other |
| 0 - 50 cc | 9221xx | 9231xx |
| 51 - 100 cc | 9221xx | 9231xx |
| 101 - 200 cc | 9222xx | 9232xx |
| 201 - 360 cc | 9223xx | 9233xx |
| 361 - 500 cc | 9224xx | 9234xx |
| 501 - 800 cc | 9225xx | 9235xx |
| 801 -1000 cc | 9226xx | 9236xx |
| Over 1000 cc | 9226xx | 9236xx |
| Passenger Hazard excluded | 9229xx | 9239xx |
| xx Miscellaneous Surcharge Code (Page 53) | | |
| * Owned or principally operated by an unmarried male under 25 or 30 years of age, depending on the insurance plan rules in effect for the state. | | |

| Florida, Maine, Nebraska, New York and Tennessee: | |
|--|---|
| Code | Description |
| 9550xx 9560xx | Unladen (empty) weight not in excess of 300 pounds: Owned or Principally operated by an unmarried male under age 25 or 30*. All Others |
| 9530xx 9540xx | Unladen (empty) weight in excess of 300 pounds: Owned or Principally operated by an unmarried male under age 25 or 30*. All Others |
| xx Miscellaneous Surcharge Code (Page 53) | |
| * Owned or principally operated by an unmarried male under 25 or 30 years of age, depending on the insurance plan rules in effect for the state. | |

Physical Damage Records

| Code | Description |
|--|--|
| 980100 980200 | No Surcharge Owned or Principally operated by an unmarried male under age 25 or 30*. All Others |
| 980300 980400 | Surcharged Owned or Principally operated by an unmarried male under age 25 or 30*. All Others |
| * Owned or principally operated by an unmarried male under 25 or 30 years of age, depending on the insurance plan rules in effect for the state. | |

3. Excess Indemnity Policies (Private Passenger - New York Only (31))

These classifications correspond to the basic limit rate class used to determine the Excess Indemnity Policy Premium. (No Exposure)

| Code | Classification | Code | Classification |
|--------|----------------|--------|----------------|
| 981600 | 1A | 988000 | 6A |
| 981700 | 1B | 988100 | 6AF |
| 981800 | 1C | 988200 | 6B |
| 981900 | 1AF | 988300 | 6BF |
| 983200 | 3A | 989000 | 7A |
| 983300 | 3B | 989100 | 7AF |
| | | 989200 | 7B |
| 983400 | 4A | 989300 | 7BF |
| 983500 | 4AF | | |
| 983600 | 4B | 989400 | 8A |
| 983700 | 4BF | 989500 | 8AF |
| | | 989600 | 8B |
| 987000 | 5A | 989700 | 8BF |
| 987100 | 5AF | | |
| 987200 | 5B | 988600 | 9 |
| 987300 | 5BF | 988700 | 9F |

4. Commercial Trucks, Truck-tractors, and Trailers *Liability RecordsPosition 104:

| Code | Type of Vehicle | Code | Type of Vehicle |
|------|----------------------|------|----------------------------|
| 0 | Light trucks | 4 | Extra heavy trucks |
| 2 | Medium trucks | 5 | Extra heavy truck-tractors |
| 3 | Heavy trucks | 6 | Trailer types |
| 3 | Heavy truck-tractors | | |

Position 105:

| Business Use | Lt., Medium & Heavy Trucks | Heavy Truck-tractors | Trailer Types |
|---|----------------------------|----------------------|---------------|
| Service | 1 | 4 | 7 |
| Retail | 2 | 5 | 8 |
| Commercial | 3 | 6 | 9 |
| All Extra Heavy Trucks & Extra Heavy Truck-Tractors code 0. | | | |

Position 106:

| Radius of Operations | Non-Fleet | Fleet |
|--------------------------------|-----------|-------|
| Local (0 - 50 Miles) | 1 | 4 |
| Intermediate (51 - 200 Miles) | 2 | 5 |
| Long Distance (Over 200 Miles) | 3 | 6 |

Position 107-109: See the Secondary Classification Code (Page 42).

*Use these codes when the rates are calculated on a per vehicle basis. See # 12 (All Other Classifications) if rates are calculated based on a gross receipts or mileage basis.

4. Commercial Trucks, Truck-tractors, and Trailers - Liability Records (cont).

| SECONDARY CLASSIFICATION CODE (Pos. 107 — 109) | | | |
|--|---|------|---|
| Codes 1xb-7xb do not apply to Light Service Trucks (except farmer's), Zone Rated Risks (except truckmen), Trailers and Semi-Trailers (except dumping operations), and Service or Utility Trailers. | | | |
| Code | Description | Code | Description |
| 1xb | Manufacturers* | 4xb | Specialized delivery* |
| 11x | Chemical | 41x | Armored cars |
| 12x | Furniture | 42x | Film delivery |
| 13x | Garment | 43x | Magazine |
| 14x | Machinery | 44x | Mail and parcel post |
| 15x | Metal | 49x | All other |
| 16x | Structural iron or steel | | |
| 17x | All other | 5xb | Waste disposal* |
| | | 51x | Automobile dismantles |
| 2xb | Truckers* | 52x | Building wrecking operators |
| 21x | Common carriers | 53x | Garbage |
| 22x | Contract carriers (other than chemical or iron and steel haulers) | 54x | Junk dealers |
| 23x | Contract carriers hauling chemicals | 55x | All other |
| 24x | Contract carriers hauling iron and steel | | |
| 25x | Exempt carriers (other than livestock haulers) | 6xb | Farmers* |
| 26x | Exempt carriers (livestock hauling) | 61x | Individually owned or family corp. (other than livestock hauling) |
| 02x | Carriers engaged in both private carriage and transporting goods, materials and commodities for others if at least 20% of their total operation is transporting goods, materials or commodities for others. | 62x | Livestock hauling |
| 03x | Tow trucks for hire | 63x | All other |
| 29x | All Other | | |
| 3xb | Food delivery* | | Dump and Transit Mix |
| 31x | Canneries and packing plants | 7xb | Dump trucks* |
| 32x | Fish and seafood | 71x | Excavating |
| 33x | Frozen foods | 72x | Sand and gravel (o/t quarrying) |
| 34x | Fruit and vegetables | 73x | Mining |
| 35x | Meat and poultry | 74x | Quarrying |
| 39x | All other | 79x | All other |
| | | | Contractors |
| | | 81x | Building - Commercial |
| | | 82x | Building - private dwellings |
| | | 83x | Electric or plumbing repair |
| | | 84x | Excavating |
| | | 85x | Street and road |
| | | 89x | All other |
| Not Otherwise Classified | | | |
| 91x | Logging and lumbering | 92x | Liquid bulk except milk vehicles (Florida only) |
| 92x | Logging and pulpwood vehicles (Florida only) | 99x | All Other |
| x Commercial Surcharge Code (Page 52) b Blank * Use these codes unless the state requires the Expanded Secondary Classifications. | | | |

. Commercial Trucks, Truck-tractors, and TrailersPhysical Damage Records

| Code | Commercial Trucks, Tractors and Trailers |
|---|--|
| 7701xb | Excluding long haul truckmen |
| 7702xb | Long haul truckmen |
| x Commercial Surcharge Code (Page 52) b Blank | |
| NOTE: Report Classification Codes 7701xb or 7702xb only when vehicles are rated on a per car month basis. If the vehicle is not rated on a per car month basis, use the Liability Classification Codes in Section 12 and report the Physical Damage records under 7708xb. | |

5. Publics

| LIABILITY RECORDS | | CLASSIFICATION | | | | |
|------------------------------|---|-------------------|------------------|--------|-------------------|------------------|
| Description | Non-Fleet | | | Fleet | | |
| | Local | Inter- mediate | Long Distance | Local | Inter- mediate | Long Distance |
| Taxicabs * | 4159xb | 4169xb | 4179xb | 4189xb | 4199xb | 4109xb |
| Limousines * | 4259xb | 4269xb | 4279xb | 4289xb | 4299xb | 4209xb |
| School Bus ** | 615sxb | 616sxb | 617sxb | 618sxb | 619sxb | 610sxb |
| School Bus — other | 625sxb | 626sxb | 627sxb | 628sxb | 629sxb | 620sxb |
| Church Bus | 635sxb | 636sxb | 637sxb | 638sxb | 639sxb | 630sxb |
| Urban Bus | 515sxb | 516sxb | — | 518sxb | 519sxb | — |
| Airport Bus | 525sxb | 526sxb | 5279xb | 528sxb | 529sxb | 5209xb |
| Inter-city Bus | 535sxb | 536sxb | 5379xb | 538sxb | 539sxb | 5309xb |
| Charter Bus | 545sxb | 546sxb | 5479xb | 548sxb | 549sxb | 5409xb |
| Sightseeing Bus | 555sxb | 556sxb | 5579xb | 558sxb | 559sxb | 5509xb |
| Transportation of Athletes | 565sxb | 566sxb | 5679xb | 568sxb | 569sxb | 5609xb |
| Social Service Automobile # | 645sxb | 646sxb | 6479xb | 648sxb | 649sxb | 6409xb |
| Social Service Automobile ## | 655sxb | 656sxb | 6579xb | 658sxb | 659sxb | 6509xb |
| Bus - N.O.C. | 585sxb | 586sxb | 5879xb | 588sxb | 589sxb | 5809xb |
| Van Pool-Employer Furnished | 411sxb | | | | | |
| Van Pool - All Other | 412sxb | | | | | |
| Seating Capacity Code | | | | | | |
| Code | Seating Capacity | | | | | |
| 1 | 1 to 8 | | | | | |
| 2 | 9 to 20 | | | | | |
| 3 | 21 to 60 | | | | | |
| 4 | Over 60 | | | | | |
| 9 | All other not secondary rated | | | | | |
| s | Seating Capacity code | | | | | |
| x | Commercial Surcharge code (Page 52) | | | | | |
| b | Blank | | | | | |
| * | Excluding Connecticut and New York taxicabs and limousines (see page 45). | | | | | |
| ** | Owned by a political subdivision or school district. | | | | | |
| # | Employee operated | | | | | |
| ## | Other than employee operated | | | | | |

5. Publics (cont.)

Liability Records (cont.)

| CONNECTICUT (06) TAXICABS AND LIMOUSINES | | |
|--|--------|------------|
| Description | Fleets | Non-Fleets |
| Taxis which pick up or discharge passengers out-of-state | | |
| Manhattan | 6681xb | 6781xb |
| New York City Airports | 6682xb | 6782xb |
| Limousines which pick up or discharge passengers out-of-state | | |
| Manhattan | 6683xb | 6783xb |
| New York City Airports | 6684xb | 6784xb |
| All other buses which pick up or discharge passengers out-of-state | | |
| Manhattan | 6685xb | 6785xb |
| New York City Airports | 6686xb | 6786xb |
| x Commercial Surcharge Code (Page 52) b Blank | | |

| NEW YORK (31) TAXICABS AND LIMOUSINES | |
|--|-----------------------------|
| Code | Classification |
| 5709xx | Driven exclusively by owner |
| 5701xx | All other |
| xx Commercial Surcharge Code (Page 52) | |

Physical Damage Records

| Code | Description |
|---|--------------------------------|
| 7703xb | Taxicabs and public livery |
| 7704xb | School buses |
| 7705xb | Other buses |
| 7708xb | All other classification codes |
| x Commercial Surcharge Code (Page 52) b Blank | |
| NOTE: Report Classification Codes 7703xb, 7704xb, and 7705xb only when vehicles are rated on a per car month basis. If the vehicle is rated on other than a per car month basis, report under 7708xb. | |

6. Garages Liability

| Class | Limited Liability Coverage | Unlimited Liability Coverage |
|--|----------------------------|------------------------------|
| Dealers | | |
| Franchised private passenger dealer | 7301xb | 7302xb |
| Franchised truck or truck-tractor dealer | 7311xb | 7312xb |
| Franchised motorcycle dealer | 7321xb | 7322xb |
| Franchised recreational vehicle dealer | 7331xb | 7332xb |
| Other franchised dealer | 7341xb | 7342xb |
| Non-franchised dealer | 7351xb | 7352xb |
| Additional property damage charge | — — — — | 7302xb |
| All other dealers | — — — — | 7070xb |
| Service (Exposure = per \$100 of payroll) | | |
| Repair shops | — — — — | 7808xb |
| Service stations | — — — — | 7810xb |
| Storage garages/public parking places | — — — — | 7812xb |
| Mobile home trailer dealer | — — — — | 7820xb |
| Commercial trailer dealer | — — — — | 7830xb |
| Additional property damage charge | — — — — | 7072xb |
| Official inspection stations | — — — — | 7073xb |
| All other service | | 7070xb |
| x Commercial Surcharge Code (Page 52) b blank | | |

7. Private Passenger TypesLiability Records

| Code | Description |
|---|---|
| 7398xb | Private passenger cars, including vehicles owned by corporations, co-partnerships or unincorporated associations, Under a Fleet Basis * |
| 7391xb | Private passenger cars, including vehicles owned by corporations, co-partnerships or unincorporated associations, Not Under a Fleet Basis ** |
| x Commercial Surcharge Code (Page 52) b Blank * Companies have the option to report New York experience under Classification Section 1 (Private Passenger Non-Fleet). ** Companies have the option to report this experience under Classification Section 1 (Private Passenger Non-Fleet). | |

Physical Damage Records

| Code | Description |
|--|--------------------------------|
| 7706xb | Private passenger types |
| 7708xb | All other classification codes |
| x Commercial Surcharge Code (Page 52) b Blank NOTE: Report Classification Code 7706xb only when vehicles are rated on a per car month basis. If rated on an other than a per car month basis, report under 7708xb. | |

8. Transportation of Migrant Workers

Transportation of Migrant Workers by farm labor contractors registered in accordance with the Farm Labor Contractor Registration Act of 1963 - Per Car Basis Liability

| Code | Description |
|--|---------------------------|
| 5926xb | Passenger hazard included |
| 5927xb | Passenger hazard excluded |
| x Commercial Surcharge Code (Page 52) b Blank | |

9. Non-owned Automobiles

Liability Records

| Code | Classification | Exposure Basis |
|--------|---|---------------------|
| | Employers non-ownership written at manual rates excluding risks afforded coverages on a minimum premium basis. Private passenger automobiles, motorcycles or trucks. | |
| 6601xb | Risks with: 1- 25 employees | Number of Employees |
| 6602xb | 26 - 100 employees | Number of Employees |
| 6603xb | 101 - 500 employees | Number of Employees |
| 6604xb | 501 -1000 employees | Number of Employees |
| 6605xb | 1001 or more employees | Number of Employees |
| | Hired automobiles - Manual rates excluding risks afforded coverage on a minimum premium basis. | |
| 6611xb | Private passenger & commercial cars (excluding truckers) | Cost of Hire # |
| 6613xb | Truckers | Cost of Hire # |
| 5000xb | Public automobiles | No Exposure |
| | Coverage afforded on a minimum or "If any" premium basis | |
| 6609xb | Employers non-ownership | No Exposure |
| 6619xb | Hired automobiles | No Exposure |
| 6629xb | Both hired automobiles and employers non-ownership | No Exposure |
| 9020xb | Drive other car coverage - Additional premium and losses under such coverages. | No Exposure |
| 6671xb | Extended non-owned automobile coverage - Additional premium and losses under such coverage. | Number of Employees |
| 7000xb | All other non-owned insurance | No Exposure |
| x | Commercial Surcharge Code (Page 52) | |
| b | Blank | |
| # | Per \$100 | |

Physical Damage Records

| Code | Description |
|--------|-------------------------------------|
| 7708xb | All other classification codes |
| x | Commercial Surcharge Code (Page 52) |
| b | Blank |

10. Composite Rating Plan

| Code | Classification | Exposure Basis |
|------------------------|-------------------------------------|----------------|
| 9140 x <i>b</i> | A-rated sizable risks | No Exposure |
| 9160 x <i>b</i> | Excluding A-rated sizable risks | No Exposure |
| 9180 x <i>b</i> | All other composite rated | No Exposure |
| <i>x</i> | Commercial Surcharge Code (Page 52) | |
| <i>b</i> | Blank | |

11. Excess Indemnity Policies: Other than Private Passenger Non-fleet — New York Only

| Code | Classification | Exposure Basis |
|------------------------|-------------------------------------|----------------|
| 9868 x <i>b</i> | All | No Exposure |
| <i>x</i> | Commercial Surcharge Code (Page 52) | |
| <i>b</i> | Blank | |

12. All Other Classifications

Liability Records

| Code | Classification | Exposure Basis* | |
|--------|--|--|--|
| 7913xb | Ambulance Services: Ambulance used for emergency purposes | Number of Employees | |
| 7914xb | Ambulance type vehicles not used for emergencies | | |
| 7905xb | Amusement device mounted on a commercial vehicle | | |
| 9620xb | Antique automobile | | |
| 7924xb | Automobile body and trailer manufactures - Coverage afforded for the factory testing hazard | | |
| 7489xb | Bobtail coverage | | |
| 7945xb | Certified public assistance insureds | | |
| 7929xb | Registration plates | | |
| 7923xb | Drive-away contractors | | |
| | Driver Training Program: | | |
| 7926xb | Educational institutions | Sets of Plates No Exposure | |
| 7927xb | Commercial driving schools | | |
| 7030xb | Explosives | | No Exposure |
| | Extraordinary Medical Benefits Coverage (Pennsylvania only): | | |
| 9500xb | With worker's compensation | | |
| 9501xb | Without worker's compensation | | |
| 7953xb | Farmers - limited registration plates | | |
| | Fire Departments: | | |
| 7908xb | Private passenger types | | |
| 7909xb | All other types | | |
| | Funeral Directors: | | |
| 7915xb | Limousines | Gross Receipts ** Gross Receipts ** | |
| 7922xb | Hearses and flower cars | | |
| | Gross Receipts Basis - Local Haul: | | |
| 7060xb | Moving vans | | |
| 7059xb | All other | | |
| | Gross Receipts Basis - Long Haul Truckmen: | | |
| 7481xb | Moving vans | | |
| 7480xb | All other | | |
| | Law Enforcement Agencies: | | |
| 7911xb | Private passenger types | | Gross Receipts ** Gross Receipts ** |
| 7942xb | Motorcycles | | |
| 7912xb | All other | | |
| | Leasing or Rental Concerns - Long Term: | | |
| 7219xb | Contingent coverage | No Exposure No Exposure | |
| 7040xb | Second level coverage | | |
| x | Commercial Surcharge Code (Page 52) | | |
| b | Blank | | |
| * | The Exposure Basis is the number of vehicles unless otherwise indicated. | | |
| ** | Per \$100 | | |

12. All Other Classifications (cont.)

Liability Records

| Code | Classification | Exposure Basis* |
|--------|--|-------------------|
| 7211xb | Leasing or Rental Concerns - Short Term: | |
| 7212xb | Trucks | |
| 7213xb | Tractors | |
| 7214xb | Trailers | |
| 7215xb | Private passenger automobiles | |
| 7216xb | Motor homes | |
| 7217xb | Miscellaneous types | |
| 7218xb | Written on a gross receipt basis | Gross Receipts ** |
| 7040xb | Written on a mileage basis | Number of Miles |
| | Irregular term | No Exposure |
| | Mileage Basis - Long Haul Truckmen: | |
| 7491xb | Moving Vans | Number of Miles |
| 7490xb | All Other | Number of Miles |
| | Mobilehomes: | |
| 7960xb | Motor homes up to 22' in length | |
| 7961xb | Motor homes more than 22' in length | |
| 7962xb | Pick-up trucks used solely to transport camper bodies | |
| 7963xb | Trailers | |
| 7060xb | Moving vans - Gross receipt basis | Gross Receipts ** |
| | Pollution Liability: | |
| 9220xb | Business auto/truckers policies (Hazardous materials) | |
| 9230xb | Business auto/truckers policies (All other) | |
| 9240xb | Garage policies | |
| 7970xb | Property damage liability coverage buyback (Michigan only) | |
| 7925xb | Repossessed automobiles | No Exposure |
| 7964xb | Snowmobiles | |
| | Special or Mobile Equipment: | |
| 7907xb | Farm equipment | |
| 7906xb | All other | |
| 7040xb | All other classifications | No Exposure |
| x | Commercial Surcharge Code (Page 52) | |
| b | Blank | |
| * | The Exposure Basis is the number of vehicles unless otherwise indicated. | |
| ** | Per \$100 | |

Physical Damage Records

| Code | Description |
|--------|-------------------------------------|
| 7708xb | All other classification codes |
| x | Commercial Surcharge Code (Page 52) |
| b | Blank |

| COMMERCIAL SURCHARGE CODE | | | | | (Pos. 108 or 109) | |
|---|---|------------------------|-------------------|---------------------------|-----------------------------|------------------|
| Only use these codes if they are specifically referenced in the Assigned Risks Classification Coding Section. | | | | | | |
| Code | Note 1 | Note 2 | Michigan (21) | | New York** (31) | |
| | Penalty Points | Percent of Surcharge * | Penalty Points | Percent of Surcharge * | Percent of Surcharge * | Penalty Points |
| | All Vehicles | All Vehicles | Motor-cycles only | All Other Vehicles | Other Than T.T.T. Non-Fleet | T.T.T. Non-Fleet |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1 | 1 | 5-15 | 1 | 5-15 | 5-15 | 1 |
| 2 | 2 | 20-25 | 2 | 20-25 | 20-25 | 2 |
| 3 | 3 | 30-35 | 3 | 30-35 | 30-35 | 3 |
| 4 | 4 | 40-45 | 4 | 40-45 | 40-45 | 4 |
| 5 | 5 | 50 | 5 | 50 | 50 | 5 |
| 6 | 6 | 55-60 | 6 | 55-60 | 55-60 | 6 |
| 7 | 7 | — — — | 7 | — — — | — — — | 7 |
| 8 | 8 | over 60 | 8 | over 60 | over 60 | 8 |
| 9 | 9+ | — — — | 9+ | — — — | — — — | 9+ |
| Note 1: Jurisdictions which have adopted a Penalty Point System. | | | | | | |
| Note 2: Jurisdictions which have adopted Percent of Surcharge basis. | | | | | | |
| * Not including surcharge for Financial Responsibility | | | | | | |
| ** Applicable to all New York vehicles except taxicabs and limousines. | | | | | | |
| NEW YORK (31) TAXICABS AND LIMOUSINES: | | | | | | |
| Inexperienced operator with no penalty points (Credit not applicable) | | | | | | |
| Code | Description | | | | | |
| 91 | Accident and conviction free: licensed 1 year or less | | | | | |
| 92 | Accident and conviction free: licensed more than 1 year but less than 3 years | | | | | |
| Experienced operator with no penalty points (Credit applicable) | | | | | | |
| 93 | 3 years - 10% credit | | | | | |
| 94 | 4 years - 20% credit | | | | | |
| 96 | 5 years - 25% credit | | | | | |
| 97 | 6 or more years - 30% credit | | | | | |
| All operators with penalty points - Not accident and conviction free: | | | | | | |
| Code | Description | | Code | Description | | |
| 01 | 1-4 penalty points | | 10 | 10 penalty points | | |
| 05 | 5 penalty points | | 11 | 11 penalty points | | |
| 06 | 6 penalty points | | 12 | 12 penalty points | | |
| 07 | 7 penalty points | | 13 | 13 penalty points | | |
| 08 | 8 penalty points | | 14 | 14 or more penalty points | | |
| 09 | 9 penalty points | | | | | |

MISCELLANEOUS SURCHARGE CODE
(Pos. 108 — 109)

Only use these codes if they are specifically referenced in the Assigned Risks Classification Coding Section.

| | Percent of Surcharge * | | | | | | | | | |
|------|-------------------------------|--------------|---------------|-----------|------------|------------|-----------|-----------|------------|------------|
| Code | All States except those named | Florida (09) | Michigan (21) | | Minn. (22) | Miss. (23) | N.Y. (31) | Ohio (34) | Okla. (35) | Texas (42) |
| | | | Motor-cycles | All Other | | | | | | |
| 00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10 | 5-15 | 5-15 | 10 | 10 | 10 | 5-15 | --- | --- | --- | 15 |
| 20 | 20-25 | 20-25 | 20 | 25 | 25 | 25 | 20 | --- | 25 | 20 |
| 30 | 30-35 | 30-45 | 30 | 35 | --- | --- | 30 | --- | --- | 30-35 |
| 40 | 40-45 | --- | --- | --- | --- | --- | 40 | --- | 40 | 40-45 |
| 50 | 50 | 50-65 | 50 | --- | 50 | 50 | 50 | 50 | --- | 50-55 |
| 60 | 55-60 | 70-75 | 60-90 | --- | 75 | 75 | 75 | 75 | 60-80 | 60-95 |
| 70 | --- | 80-125 | 100 | --- | 100-125 | 100-125 | 100 | 100 | 100 | 100 |
| 80 | 61+ | 126+ | --- | --- | 126+ | 126+ | 101+ | --- | 101+ | --- |

* Not including surcharge for Financial Responsibility

| EXPERIENCE RATING MODIFICATION FACTOR (Pos. 110 — 112) (P) | |
|---|--|
| ASSIGNED RISKS ONLY | <p>This field is only required for select commercial automobile records. It should only be reported for those assigned risk records that report liability experience (Coverage Codes 1-3). Leave positions 110-112 blank if this field does not apply.</p> <p>If this field does apply, convert the Experience Rating Modification Factor according to the examples shown below. The Experience Rating Modification Factor should not include any schedule rating modifications, IRPM's, expense or package modification factors since these modifiers do not apply to assigned risks. If no factor has been applied, code this field 100.</p> <p>For example:</p> |
| Code | Experience Rating Modification Factor |
| 100 | None |
| 090 | .900 |
| 067 | .665 |

| LIMITED CODING - LOSS TRANSACTION CODE (Pos. 110) (L) | |
|--|---|
| <p>This code identifies a loss transaction on limited coded records. The field will be populated on loss-related Transaction Codes if the record is not fully coded. The field should be blank in all other cases.</p> <p>For outstanding limited coding loss records, report the final reserve amount at the end of each quarter.</p> | |
| Code | Transaction Type |
| Y | Loss Limited Coding (includes Paid Loss Limited Coding and Outstanding Loss Limited Coding) |

STATE EXCEPTION CODING

FOR THE AUTOMOBILE STATISTICAL PLAN

Many state insurance departments have specific requirements regarding the automobile data reported for their state. There are several fields in this statistical plan that already take into account some of these unique requirements. However, a few states require fields that are so unique that a special section of the statistical plan was needed.

The following pages that are titled STATE EXCEPTION CODING contain new fields based on individual state requirements. Each exception code should be left blank unless specific instructions are listed for that state.

EXCEPTION CODE A

Kentucky (16)

| TORT LIMITATION (Pos. 114 — 115) (L) | |
|---|---|
| This code applies to liability losses for Private Passenger, Non-Fleet automobiles in Kentucky. | |
| Code | Description |
| 01 | No rejection of tort limitation - Residual Bodily Injury record only |
| 02 | All other liability records |

Michigan (21)

| INTRASTATE/INTERSTATE CODE (Pos. 114 — 115) | |
|---|--|
| This code applies to Non-Fleet, Other Than Private Passenger records in Michigan. | |
| Code | Description |
| 03 | Vehicles written on an intrastate basis |
| 04 | Vehicles written on an interstate basis |

New Jersey (29)

| THRESHOLD/TORT LIMITATION (Pos. 114 — 115) | |
|--|--|
| This code applies to all Liability and Personal Injury Protection records in New Jersey. | |
| Code | Description |
| Liability Records | |
| 04 | No Threshold/No Tort Limitation |
| 05 | Verbal Threshold/Tort Limitation |
| 99 | Liability with Unknown Threshold/Tort Limitation |
| Personal Injury Protection Records | |
| Insured has chosen PIP Medical Expense Benefits as Primary Coverage: | |
| 06 | No Threshold/No Tort Limitation |
| 08 | Verbal Threshold/Tort Limitation |
| Insured has chosen PIP Medical Expense Benefits as Secondary Coverage: | |
| 07 | No Threshold/No Tort Limitation |
| 09 | Verbal Threshold/Tort Limitation |

EXCEPTION CODE A (cont.)

New York (31)

| ACCIDENT PREVENTION CREDIT (Pos. 114 — 115) | |
|--|--|
| This code applies to all Private Passenger, Personal Injury Protection records in New York (Coverage Code 4). The accident prevention credit applies on a per vehicle basis. | |
| Code | Description |
| 01 | Vehicle with accident prevention credit |
| 02 | Vehicle without accident prevention credit |

Pennsylvania (37)

| TORT LIMITATION (Pos. 114 — 115) (L) | |
|---|-----------------------------------|
| This code applies to liability losses for Private Passenger, Non-Fleet automobiles in Pennsylvania. | |
| Code | Description |
| 04 | Full Tort selected by the insured |
| 05 | Limited Tort selected by insured |

South Carolina (39)

| S.C. REINSURANCE FACILITY (S.C.R.F.) (Pos. 114 — 115) | |
|--|---|
| This code distinguishes between business written under the S.C.R.F. and that which is not. | |
| Code | Description |
| 01 | Business written under the S.C.R.F. and ceded to S.C.R.F. |
| 02 | Business written under the S.C.R.F. and retained by the company |
| 09 | Business not written under the S.C.R.F. |

EXCEPTION CODE B

New Jersey (29)

| MULTI - CAR RISKS (Pos. 116 — 117) | |
|--|--|
| This field applies to PIP, multi-car risks only. Leave this field blank on single car risks. | |
| Code | Description |
| | Multi-Car Risks Subject to PIP Premium Discount Named insured is the owner and only designated operator of two or more automobiles and the only licensed driver residing in the household. |
| 17 | Principal Automobile - Not Discounted |
| 27 | Additional Automobile(s) - Discounted |
| | Multi-Car Risks Not Subject to PIP Premium Discount The number of automobiles insured by the same insurer exceeds the number of licensed drivers customarily operating such automobiles. |
| 47 | |
| 37 | All Other Automobiles |

New York (31)

| PRIMARY NO-FAULT HEALTH PLAN (Pos. 116 — 117) | |
|--|--|
| This field applies to No-Fault (PIP) premium and loss records only. Leave this field blank on all other records. | |
| Code | Description |
| 01 | Employer's work loss plan primary |
| 02 | Medicare primary |
| 03 | No basic PIP medical expense because medical coverage is provided under an approved health plan |
| 04 | Employer's work loss plan and medicare coordination, both primary |
| 05 | Employer's work loss plan primary with no basic PIP medical expense because medical coverage is provided under an approved health plan |
| 09 | PIP is primary insurance |
| 99 | Unknown |

EXCEPTION CODE B (Cont.)

Pennsylvania (37)

| 55 & OVER DISCOUNT | | (Pos. 116 — 117) (P) |
|--------------------|---|----------------------|
| Code | Description | |
| 00 | Not Applicable | |
| 01 | "55 & Over" discount for successful completion of PA certified training course. | |

EXCEPTION CODE C

New Jersey

| ENGINE SIZE (Pos. 118-119) | |
|--|------|
| This field applies to motorcycles, motor scooters, etc. Leave this field blank on all other classes of vehicles. | |
| Size of Engine | Code |
| 0 - 50 cc | 01 |
| 51 - 100 cc | 02 |
| 101 - 200 cc | 03 |
| 201 - 360 cc | 04 |
| 361 - 500 cc | 05 |
| 501 - 800 cc | 06 |
| 801 -1000 cc | 07 |
| Over 1000 cc Passenger | 08 |
| Hazard excluded | 09 |

EXCEPTION CODE C (cont.)

Pennsylvania (37)

| COMBINED FIRST PARTY BENEFITS | | | | (Pos. 118 — 119) |
|--|-----------------------|-------------------------|------------------------|-------------------------|
| Indivisible Premium Policies | | | | |
| This field is only required on Coverages G and R. Leave this field blank on all other coverages. | | | | |
| Medical Benefits | Loss of Income | Accidental Death | Funeral Expense | Code |
| 5,000 Limit | \$ 0 | 0 | Any | 51 |
| | 1,000/ 5,000 | 0 | 1,500 | 52 |
| | 1,000/ 5,000 | All Other | All Other | 53 |
| | 1,000/15,000 | Any | Any | 54 |
| | 1,500/25,000 | Any | Any | 55 |
| | 2,500/50,000 | Any | Any | 56 |
| | All Other | Any | Any | 59 |
| 10,000 Limit | \$ 0 | 0 | Any | 01 |
| | 1,000/ 5,000 | 0 | 1,500 | 02 |
| | 1,000/ 5,000 | All Other | All Other | 03 |
| | 1,000/15,000 | Any | Any | 04 |
| | 1,500/25,000 | Any | Any | 05 |
| | 2,500/50,000 | Any | Any | 06 |
| | All Other | Any | Any | 09 |
| 25,000 Limit | \$ 0 | Any | Any | 11 |
| | 1,000/ 5,000 | Any | Any | 12 |
| | 1,000/15,000 | Any | Any | 13 |
| | 1,500/25,000 | Any | Any | 14 |
| | 2,500/50,000 | Any | Any | 15 |
| | All Other | Any | Any | 19 |
| 50,000 Limit | \$ 0 | Any | Any | 21 |
| | 1,000/ 5,000 | Any | Any | 22 |
| | 1,000/15,000 | Any | Any | 23 |
| | 1,500/25,000 | Any | Any | 24 |
| | 2,500/50,000 | Any | Any | 25 |
| | All Other | Any | Any | 29 |
| 100,000 Limit | \$ 0 | Any | Any | 31 |
| | 1,000/ 5,000 | Any | Any | 32 |
| | 1,000/15,000 | Any | Any | 33 |
| | 1,500/25,000 | Any | Any | 34 |
| | 2,500/50,000 | Any | Any | 35 |
| | All Other | Any | Any | 39 |
| All Other | \$ 0 | Any | Any | 41 |
| | 1,000/ 5,000 | Any | Any | 42 |
| | 1,000/15,000 | Any | Any | 43 |
| | 1,500/25,000 | Any | Any | 44 |
| | 2,500/50,000 | Any | Any | 45 |
| | All Other | Any | Any | 49 |

EXCEPTION CODE D

New York (31)

| NEW YORK TAXICABS & PUBLIC LIVERY (Pos. 120 — 121) | |
|---|---|
| These codes only apply to voluntary risks in the state of New York. Liability records for taxicabs and public livery must contain one of the following codes. | |
| Territories of: Bronx 001, Bronx Suburban 003, Brooklyn 017, Manhattan 018, Queens 019 and Queens Suburban 055. | |
| Code | Description |
| 32 | Taxicabs owned by owner of single cab: Driven exclusively by owner |
| 33 | Not driven exclusively by owner |
| 28 | Not driven by owner; single shift, named driver |
| 29 | All other |
| 30 | Taxicabs owned by owner of 2 or more cabs - Fleet operated Written under the credit plan |
| 31 | Not written under the credit plan |
| 35 | Taxicabs owned by owner of 2 or more cabs - Not fleet operated Used for single shift per day |
| 36 | Used for double shift per day |
| 09 | Public Livery Driven exclusively by owner |
| 01 | All other |
| Territories of: Buffalo 007, Buffalo Semi-Suburban 008, and Albany 013. | |
| 09 | Taxicabs and Public Livery Driven exclusively by owner |
| 32 | All other non-fleet |
| 34 | Fleets with 5 or more cars |
| All Other Territories: | |
| 09 | Taxicabs and Public Livery Driven exclusively by owner |
| 01 | All other |

| COMPANY USE | (Pos. 140 — 150) |
|--|-------------------------|
| Positions 140 — 150 are for company use only. This field may be left blank, or may contain any alphanumeric combination suited to a company's reporting purposes. If it is necessary to report sequence numbers, please do so in this field. | |

| VEHICLE IDENTIFICATION | (Pos. 151 — 167) |
|---|-------------------------|
| This field contains the 17-digit Vehicle Identification Number of the insured vehicle. For Vehicle Identification Numbers less than 17 digits, left justify when reporting. | |