



Commerce Elite Package Endorsement

With respect to the coverage provided by this endorsement, the provisions of the policy apply unless expressly modified by this endorsement.

For an additional premium, the following additional coverages apply:

1. Collision and Limited Collision Deductible Savings Program

If a listed operator on **your** policy, who qualifies for the Excellent Driver Discount Plus or Excellent Driver Discount, is involved in an **accident** while operating an **auto** covered under **Collision** (Part 7) or Limited **Collision** (Part 8), the applicable deductible will be waived up to a maximum of \$500.

2. Original Equipment Manufacturer Parts Coverage

We will pay to replace any damaged crash part which cannot be repaired, with a part manufactured or licensed by the original equipment manufacturer. The damage must involve an auto described on the Coverage Selections Page for which a premium charge is shown for **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9), and the damage must:

- (1) Arise from a covered loss under **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9);
- (2) Occur to an **auto** with less than 50,000 miles; and
- (3) Occur to an **auto** that is no more than 10 model years old.

A crash part, as used in this endorsement, means a motor vehicle part of sheet metal or plastic that constitutes the visible exterior of the **auto**, including inner and outer panels. It does not include glass or mechanical non-body related parts.

All other provisions of **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9) apply.

3. Mechanical Parts Replacement Cost Coverage

We will pay to replace any damaged mechanical non-body related part, which cannot be repaired, without a deduction for depreciation. The damage must involve an auto described on the Coverage Selections Page for which a premium charge is shown for **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9), and the damage must:

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- (3) Occur to an **auto** that is no more than 10 model years old.

This coverage does not apply if your **auto** is a motorcycle or a motor home.

All other provisions of **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9) apply.

4. Emergency Travel Expense

We will pay additional expenses incurred by **you, your household members** and anyone **occupying your auto**, for lodging and meals, in the event of a covered **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9) loss to **your auto**. The loss must occur more than 100 miles from **your** principal residence. Our limit of liability for these additional expenses will be \$100 per day to a maximum of \$300, regardless of the number of occupants in the auto at the time of loss. Coverage will end when the **auto** is returned to use. No deductible applies to this coverage.

All other provisions of **Collision** (Part 7), Limited **Collision** (Part 8) or Comprehensive (Part 9) apply.

5. Additional Towing and Labor Coverage

We will pay up to \$75 in addition to any limit shown in the Coverage Selections Page for Towing and Labor (Part 11) for which a premium is paid.

All other provisions of Towing and Labor (Part 11) apply.

6. Accidental Discharge of Air Bag Coverage

We will pay the cost to repair or restore an airbag that accidentally discharges, without the **auto** being in an accident. This coverage applies to any **auto** shown on the Coverage Selections Page for which a premium charge is shown for Comprehensive (Part 9). However, if **you** are entitled by other insurance or warranty for the cost to repair or restore the airbag, **we** will pay only the cost not covered by the other insurance or warranty. No deductible applies to this coverage.

General Provision and Exclusion 9. does not apply to this coverage.



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General Provision and Exclusion 9. does not apply to this coverage.



Supplemental Application for Massachusetts Motor Vehicle Insurance

(must be completed and submitted with all Personal Auto applications)

Named Insured	
Mailing Address	
City/State	Zip Code

Producer Name:
Producer Code:
Policy Effective Date:

- Do you have **Massachusetts Property Insurance** on your principal place of residence? Yes No
 If yes, please provide the following information, as you may be eligible for an **Account Discount**.
 What type of property policy do you have? Homeowners Condo Renters
 What company is your property policy with? Commerce Fair Plan Other (Name) _____
- If you answered 'No' to Question #1, please indicate if you have **Property Insurance** on a principal place of residence located outside of Massachusetts? Yes No
 If yes, indicate the name of the Insurance Company _____
- Do you have a **Foreign Driver's License**? If yes, attach a copy to this application. Yes No
- Were you previously licensed to drive **outside of Massachusetts or in a foreign country**? Yes No
 If yes, attach a 917 Form for possible driving credit.
- Do you drive less than 5,000 miles, or 5,001 to 7,500 miles annually and qualify for the **Annual Mileage Discount (AMD)**? Yes No
 If yes, attach a copy of the AMD Form to this application.
- Would you like to purchase the **Enhancer Package Endorsement** for an additional premium? Yes No
- Would you like to purchase the **Commerce Elite Package Endorsement** for an additional premium? Yes No
- Would you like to purchase **Auto Loan/Lease Coverage** for any of your vehicles for an additional premium? Yes No
 Please check applicable vehicle: #1_____ #2_____ #3_____ #4_____

I declare that all the statements contained in this Supplemental Application are complete and true to the best of my knowledge as of this date. I understand that the company may exchange payment of premium information and accident or claim information with my previous automobile insurance company.

Signature of Applicant

Date and Time

TO BE COMPLETED BY PRODUCER:

The information contained in this application is as told to me by the applicant and is true and complete to the best of my knowledge.

Signature of Producer

Date and Time

IF THIS APPLICATION IS BEING ELECTRONICALLY TRANSMITTED, THE FOLLOWING MUST ALSO BE COMPLETED:

I agree to be bound by this electronic record and it shall have the same legal force and effect as the written application.

Applicant's Name

Date

“Ways To Save” Guide Consumer Notification

In accordance with Massachusetts General Laws, we, The Commerce Insurance Company, are required to provide you, the consumer, with the following required consumer information guide: “Your Consumer Guide – Ways To Save on your 2008 Automobile Insurance” (“Ways to Save Guide”).

The “Ways to Save Guide” is important for all policyholders as it provides a detailed description of compulsory coverages, optional coverages, and ways to lower your premium. In addition, it provides important information to help consumers understand how driving records impact insurance premiums.

You may choose to receive the “Ways to Save Guide” either electronically, by accessing our company website, or in paper form. Indicate by checking the box below if you would like to receive the “Ways to Save Guide” through our company website at www.commerceinsurance.com. If you do not elect to receive the “Ways to Save Guide” electronically, it will be provided to you in paper form.

I elect to receive the “Ways to Save Guide” electronically from The Commerce Insurance Company web site at www.commerceinsurance.com

If you have any questions regarding the “Ways to Save Guide”, or would like a free paper copy in the future, please contact The Commerce Insurance Company at 1-800-922-8276 extension 14414.

Signature of Applicant

Date



Supplemental Application for Massachusetts Motor Vehicle Insurance

(must be completed and submitted with all Personal Auto applications)

Named Insured		Producer Name:	
Mailing Address		Producer Code:	
City/State	Zip Code	Policy Effective Date:	

- Do you have **Massachusetts Property Insurance** on your principal place of residence? ___ Yes ___ No
 If yes, please provide the following information, as you may be eligible for an **Account Discount**.
 What type of property policy do you have? ___ Homeowners ___ Condo ___ Renters
 What company is your property policy with? ___ Commerce ___ Fair Plan ___ Other (Name) _____
- If you answered 'No' to Question #1, please indicate if you have **Property Insurance** on a principal place of residence located outside of Massachusetts? ___ Yes ___ No
 If yes, indicate the name of the Insurance Company _____
- Do you have a **Foreign Driver's License**? If yes, attach a copy to this application. ___ Yes ___ No
- Were you previously licensed to drive **outside of Massachusetts or in a foreign country**? ___ Yes ___ No
 If yes, attach a 917 Form for possible driving credit.
- Do you drive less than 5,000 miles, or 5,001 to 7,500 miles annually and qualify for the **Annual Mileage Discount (AMD)**? ___ Yes ___ No
 If yes, attach a copy of the AMD Form to this application.
- Would you like to purchase the **Enhancer Package Endorsement** for an additional premium? ___ Yes ___ No
- Would you like to purchase the **Commerce Elite Package Endorsement** for an additional premium? ___ Yes ___ No
- Would you like to purchase **Auto Loan/Lease Coverage** for any of your vehicles for an additional premium? ___ Yes ___ No
 Please check applicable vehicle: #1 _____ #2 _____ #3 _____ #4 _____

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I declare that all the statements contained in this Supplemental Application are complete and true to the best of my knowledge as of this date. I understand that the company may exchange payment of premium information and accident or claim information with my previous automobile insurance company.

Signature of Applicant Date and Time

TO BE COMPLETED BY PRODUCER:
The information contained in this application is as told to me by the applicant and is true and complete to the best of my knowledge.

Signature of Producer Date and Time

IF THIS APPLICATION IS BEING ELECTRONICALLY TRANSMITTED, THE FOLLOWING MUST ALSO BE COMPLETED:
I agree to be bound by this electronic record and it shall have the same legal force and effect as the written application.

Applicant's Name Date

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Consumer Notification**

In accordance with Massachusetts General Laws, we, The Commerce Insurance Company, are required to provide you, the consumer, with the following required consumer information guide: “Your Consumer Guide – Ways To Save on your 2008 Automobile Insurance” (“Ways to Save Guide”).

The “Ways to Save Guide” is important for all policyholders as it provides a detailed description of compulsory coverages, optional coverages, and ways to lower your premium. In addition, it provides important information to help consumers understand how driving records impact insurance premiums.

You may choose to receive the “Ways to Save Guide” either electronically, by accessing our company website, or in paper form. Indicate by checking the box below if you would like to receive the “Ways to Save Guide” through our company website at www.commerceinsurance.com. If you do not elect to receive the “Ways to Save Guide” electronically, it will be provided to you in paper form.

I elect to receive the “Ways to Save Guide” electronically from The Commerce Insurance Company web site at www.commerceinsurance.com

If you have any questions regarding the “Ways to Save Guide”, or would like a free paper copy in the future, please contact The Commerce Insurance Company at 1-800-922-8276 extension 14414.

Signature of Applicant

Date



The Commerce Insurance Company
211 Main Street, Webster, MA 01570

ADVISORY NOTICE TO POLICYHOLDERS
Removal of Commerce Elite Package Endorsement

Mass. Law requires that you be notified of reductions and eliminations of coverage. Your policy is no longer eligible for the coverage provided by our Commerce Elite Package Endorsement. As a result, we are changing your policy as follows:

Endorsement CIC-2126 has been deleted.

Review your policy for complete information on your coverage. If you have any questions, contact your insurance agent.



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Review your policy for complete information on your coverage. If you have any questions, contact your insurance agent.

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RULE 37. OPTIONAL COVERAGES

Commerce Enhancer Package Endorsement – CIC 2122

The Commerce Enhancer Package Endorsement provides increased limits for Bail Bonds, Loss of Earnings and Substitute Transportation, as well as the following additional coverages: Cellular Telephone Replacement, Glass Repair Coverage, Laptop Computer Replacement, Personal Belongings, Pet Injury Coverage, Seat Belt/Air Bag Benefit, Waiver of Collision Deductible, and Replacement Cost Coverage. This endorsement is available for purchase only for policies that do not contain the AAA Member Package Endorsement. CIC-2114.

This endorsement can be purchased for an additional per policy annual and minimum retained premium of \$20.

Commerce Elite Package Endorsement – CIC 2126

The Commerce Elite Package Endorsement provides the following additional coverages: Collision and Limited Collision Deductible Savings Program, Original Equipment Manufacturer Parts Coverage, Mechanical Parts Replacement Cost Coverage, Emergency Travel Expense, Additional Towing and Labor Coverage, and Accidental Discharge of Air Bag Coverage.

This endorsement can be purchased for any policy that provides Comprehensive (Part 9) coverage. There is a \$35 annual and minimum retained premium for this endorsement.

Auto Loan/Lease Coverage – CIC 2125

A policy providing Collision (Part 7) and Comprehensive (Part 9) may be extended to provide coverage for the difference between the outstanding indebtedness on a loan/lease agreement on a new vehicle, and the actual cash value of the vehicle, subject to the following:

- a. Auto Loan/Lease Coverage may be provided only to a vehicle that is a private passenger auto, pickup, or van, as defined in Rule 27, except that antiques and motor homes/camper bodies are not eligible; and
- b. The insured must request, and the auto loan/lease coverage must be added, within 30 days of leasing or financing a new vehicle. A new vehicle is defined as one which is 5 model years old or less.

There is a 5% charge of both the Collision (Part 7) and Comprehensive (Part 9) premiums for this endorsement.

RULE 38. RESERVED FOR FUTURE USE

RULE 37. OPTIONAL COVERAGES

Commerce Enhancer Package Endorsement – CIC 2122

The Commerce Enhancer Package Endorsement provides increased limits for Bail Bonds, Loss of Earnings and Substitute Transportation, as well as the following additional coverages: Cellular Telephone Replacement, Glass Repair Coverage, Laptop Computer Replacement, Personal Belongings, Pet Injury Coverage, Seat Belt/Air Bag Benefit, Waiver of Collision Deductible, and Replacement Cost Coverage. This endorsement is available for purchase only for policies that do not contain the AAA Member Package Endorsement. CIC-2114.

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This endorsement can be purchased for any policy that provides Comprehensive (Part 9) coverage. There is a \$35 annual and minimum retained premium for this endorsement.

Auto Loan/Lease Coverage – CIC 2125

A policy providing Collision (Part 7) and Comprehensive (Part 9) may be extended to provide coverage for the difference between the outstanding indebtedness on a loan/lease agreement on a new vehicle, and the actual cash value of the vehicle, subject to the following:

- a. Auto Loan/Lease Coverage may be provided only to a vehicle that is a private passenger auto, pickup, or van, as defined in Rule 27, except that antiques and motor homes/camper bodies are not eligible; and
- b. The insured must request, and the auto loan/lease coverage must be added, within 30 days of leasing or financing a new vehicle. A new vehicle is defined as one which is 5 model years old or less.

There is a 5% charge of both the Collision (Part 7) and Comprehensive (Part 9) premiums for this endorsement.

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**PRIVATE PASSENGER ENDORSEMENTS
ALPHABETICAL INDEX
December 1, 2008**

<u>TITLE</u>	<u>AIB FORM #/CIC Form #</u>
AAA Member Package Endorsement	CIC 2114 (Ed. 07-08)
Agreed Amount - Comprehensive	MPY-0034-S (Ed. 01-83)
Antique Auto	M-0047-S (Ed. 01-89)
Auto Loan/Lease Coverage	CIC 2125 (Ed. 12-08)
Commerce VIP Package Endorsement	CIC 2123 (Ed. 08-08)
Commonwealth of Massachusetts Employees Using Autos They Do Not Own in the Course of Their Employment	M-0069-S (Ed. 01-80)
Commerce Elite Package Endorsement	CIC 2126 (Ed. 12-08)
Coverage for Anyone Renting An Auto To You	M-0070-S (Ed. 01-90)
Coverage for Customized Vans and Pickups	MPY-0037-S (Ed. 01-94)
Enhancer Package Endorsement	CIC 2122 (Ed. 08-08)
Excess Electronic Equipment Coverage	MPY-0041-S (Ed. 01-03)
Federal Employees Using Autos They Do Not Own In The Course of Their Employment	M-0049-S (Ed. 01-77)
\$100 Glass Deductible	MPY-0039-S (Ed. 01-89)
Guest Occupants Exclusion	M-0002-S (Ed. 01-77)
Massachusetts Automobile Insurance Policy	Seventh Edition (1-00)
Massachusetts Mandatory Endorsement	M-0099-S (Ed. 04-07)
Mobile Home Endorsement	MPY-0002-S (Ed. 01-77)
Non-Renewal of Policy - Motorcycles, Recreational Vehicles and Trailers	M-0103-S (Ed. 01-89)
Operator Exclusion Form	CIC 616 (Rev. 01-01-02)
Original Equipment Manufacturer Parts Coverage	MPY-0040-S (Ed. 01-01)
Other Optional Insurance - Combined Additional Coverage	MPY-0031-S (Ed. 01-89)
Other Optional Insurance - Fire, Lightning and Transportation	MPY-0028-S (Ed. 01-89)
Other Optional Insurance - Theft	MPY-0029-S (Ed. 01-89)
Restriction of PIP for Employers Subject to the Massachusetts Workers' Compensation Act	M-0063-S (Ed. 01-88)
Stated Amount Coverage	MPY-0027-S (Ed. 01-83)
Substitute Transportation Coverage	M-0105-S (Ed. 01-01)
Suspension of Coverage-Reduction of Limits	MPY-0032-S (Ed. 01-05)

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MASSACHUSETTS PRIVATE PASSENGER AUTOMOBILE INSURANCE MANUAL

Transportation of Fellow Employees, Students or Others	M-0004-S (Ed. 01-88)
Trust Endorsement	M-0107-S (Ed. 01-06)
Use of Other Autos Vehicles Furnished or Available for Regular Use	M-0051-S (Ed. 01-06)
Use of Other Autos Vehicles Furnished or Available for Use As Public or Livery Conveyances	M-0052—S (Ed. 01-06)
Waiver of Deductible Endorsement	MPY-0016-S (Ed. 01-83)

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