

**MASSACHUSETTS PRIVATE PASSENGER AUTOMOBILE INSURANCE MANUAL**

**GROUP MARKETING PLANS**

**1. Norfolk & Dedham Group**

Eligibility: employees and retirees of the Norfolk & Dedham Group

Deviation: -5%

GP-1

Norfolk & Dedham Mutual Fire Insurance Company

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193R Application Spreadsheet															
Year Plan Will be Applied															
2009															
INSURANCE															
COMPANY*															
GROUP NAME*															
STREET ADDRESS															
CITY/TOWN															
STATE															
ZIP															
AUTO (A) or HOME (H)															
PROPOSED RATE															
PROPOSED EFFECTIVE DATE															
CU, E,M,U GROUP															
TYPE**															
TOTAL NUMBER															
ELIGIBLE NUMBER OF CURRENT															
INSUREDS															
ORIGINAL PLAN															
DATE															
AGENCY OR MKT. REP.															
EXPERIENCE SUBMITTED															
YES OR NO															
Norfolk & Dedham Mutual Fire Insurance	Norfolk & Dedham Gp. er	222 Ames St	Dedham	MA	02027	A	5%	4/3/2010	E	237	230	108	1/1/1994	Paul D'Atilio, Thos Foley	No
* Provide full insurance company name and full group name. If there is more than one company name, please separate the company name by a comma.															
** Group Type - E = employee, CU = credit union, M = all other member groups, U = unions															

**EXPENSE EXHIBIT FOR ALL AUTO & HOME 193R GROUP MARKETING PLANS**

Year Plan Will be Applied <insert year>

Insurers are required to submit the expense ratios underlying their current rates and the expense ratio or average expense per unit associated with the group marketing plan

<u>INSURANCE</u>		(1)	(2)	(3)	(4)
<u>COMPANY</u>	<u>GROUPNAME</u>	<u>Expenses Assumed</u> <u>In Insurer's Rates</u> <u>Currently On File</u>	<u>Expenses Associated</u> <u>With Group Marketing</u> <u>Plan</u>	<u>Reasons for</u> <u>Expensed</u> <u>Difference</u>	<u>Requested</u> <u>Group Rate</u> <u>Deviation</u>

**PREMIUM/LOSS/EXPENSE EXHIBIT FOR 193R AUTO/HOME GROUPS AT LEAST 3 YEARS OLD WITH 1,000 or MORE INSURED UNITS**

<insert year below>

Year Plan Will be Applied

2010

Insurers are required to submit a minimum three (3) full years of data, but can at their option submit additional years of data by inserting additional columns.

<u>INSURANCE</u> <u>COMPANY</u>	<u>GROUPNAME</u>	<u>Earned Premium</u>			<u>Incurred Loss Incl. IBNR</u>			<u>Incurred Loss Ratio</u>			3 Yr. Total
		2007	2008	2009	2007	2008	2009	2007	2008	2009	

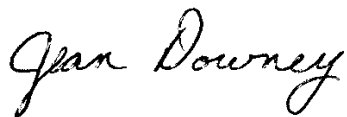
MASSACHUSETTS  
GROUP MARKETING NEW/RENEWAL  
AFFIDAVIT

Attached is the documentation required for the application for the listed Norfolk & Dedham Mutual Fire Insurance Companies Group Marketing client.

We have verified that it is the intention of each of the following clients to participate in the Group Marketing program within their organization for the year 2010 and have confirmed their participation to them in writing:

Norfolk & Dedham Group Employees and Retirees

You may contact any of our clients to verify information and confirm participation.

A handwritten signature in cursive script that reads "Jean Downey".

Jean E. Downey, CPCU, CIC, ARM, ARe, AIS  
Assistant Business Unit Leader, Personal Lines

2/2/2010