



Date: _____

WASHINGTON
INSURER RATE FILING
ADOPTION OF RATING ORGANIZATION
PROSPECTIVE LOSS COSTS
REFERENCE FILING ADOPTION FORM

1. INSURER NAME _____
2. LINE OF INSURANCE _____
3. RATING ORGANIZATION _____
4. RATING ORGANIZATION REFERENCE FILING # _____

5. The above insurer hereby declares that it is a member, subscriber or service purchaser of the named rating organization for this line of insurance. The insurer hereby files to be deemed to have independently submitted as its own filing the prospective loss costs in the captioned Reference Filing.

The insurer's rates will be the combination of the prospective loss costs and the loss cost adjustments and, if used, the expense constants specified in the attachments.

6. PROPOSED RATE LEVEL CHANGE _____ % EFFECTIVE DATE _____
7. ATTACH "SUMMARY OF SUPPORTING INFORMATION FORM"
(Use a separate Summary for each loss cost adjustment and, if used, expense constant.)
8. CHECK ONE OF THE FOLLOWING:

- The insurer hereby files to have its loss cost adjustments and, if used, expense constants be applicable to future revisions of the rating organization's prospective loss costs for this line of insurance. The insurer's rates will be the combination of the rating organization's prospective loss costs and the insurer's loss cost adjustments and, if used, expense constants specified in the attachments. The rates will apply to policies written on or after the effective date of the rating organization's prospective loss costs. This authorization is effective until disapproved by the Commissioner, or amended or withdrawn by the insurer.
- The insurer hereby files to have its loss cost adjustments and, if used, expense constants be applicable only to the above Rating Organization Reference Filing.

Insurer Name: _____

Date: _____

WASHINGTON
INSURER RATE FILING
ADOPTION OF RATING ORGANIZATION PROSPECTIVE LOSS COSTS
SUMMARY OF SUPPORTING INFORMATION FORM

CALCULATION OF COMPANY LOSS COST ADJUSTMENT

1. Line, Subline, Coverage, Territory, Class, etc. combination to which this page applies:

2. Loss Cost Modification:

A. The insurer hereby files to adopt the prospective loss costs in the captioned reference filing:
(CHECK ONE)

Without modification. (If you check this box, skip line 2B and use 1.000 as the factor in line 2C.)

With the following modification(s). (Describe the nature of the modification -- e.g., variation in loss experience or effective date.)

B. Indicated Loss Cost Modification Factor (attach supporting information): _____

C. Selected Loss Cost Modification Factor: _____
(If different than 2B, attach an explanatory memorandum.)

NOTE: IF EXPENSE CONSTANTS ARE UTILIZED, ATTACH "EXPENSE CONSTANT SUPPLEMENT" OR OTHER SUPPORTING INFORMATION. DO NOT COMPLETE ITEMS 3 - 6 BELOW.

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information, including an explanation of how investment income has been taken into account in determining 3E.)

	Selected Provisions
A. Commission	_____ %
B. Other Acquisition Expense	_____ %
C. General Expense	_____ %
D. Taxes, Licenses & Fees	_____ %
E. Underwriting Profit (Loss) & Contingencies	_____ %
F. Other (explain)	_____ %
G. TOTAL	_____ %

4A. Expected Loss & Loss Adjustment Expense Ratio: $ELR = 100\% - 3G =$ _____ %

4B. Expected Loss & Loss Adjustment Expense Ratio in decimal form = _____

5. Company Loss Cost Adjustment: $(2C / 4B) =$ _____

6. Proposed rate level change for the coverages to which this page applies _____ %

Insurer Name: _____

Date: _____

WASHINGTON
EXPENSE CONSTANT SUPPLEMENT

CALCULATION OF COMPANY LOSS COST ADJUSTMENT WITH EXPENSE CONSTANTS

3. Development of Expected Loss Ratio. (Attach exhibit detailing insurer expense data and/or other supporting information, including an explanation of how investment income has been taken into account in determining 3E.)

	Overall	Selected Provisions		
		Variable	Fixed	
A. Commission	_____ %	_____ %	_____ %	_____ %
B. Other Acquisition Expense	_____ %	_____ %	_____ %	_____ %
C. General Expense	_____ %	_____ %	_____ %	_____ %
D. Taxes, Licenses & Fees	_____ %	_____ %	_____ %	_____ %
E. Underwriting Profit (Loss) & Contingencies	_____ %	_____ %	_____ %	_____ %
F. Other (explain)	_____ %	_____ %	_____ %	_____ %
G. TOTAL	_____ %	_____ %	_____ %	_____ %

4. A. Expected Loss & Loss Adjustment Expense Ratio:
ELR = 100% - Overall 3G = _____ %

B. ELR expressed in decimal form = _____

C. Variable Expected Loss & Loss Adjustment Expense Ratio:
VELR = 100% - Variable 3G = _____ %

D. VELR in decimal form = _____

5. Company Expense Constant:
[(1.00 / 4B) - (1.00 / 4D)] x Average Underlying Loss Cost* = _____
(May be rounded to the nearest dollar)

6. Company Loss Cost Adjustment: (2C / 4D) = _____
(May be rounded to the nearest hundredth)

7. Proposed rate level change for the coverages to which this page applies _____ %

*NOTE: An exhibit showing the derivation of the Average Underlying Loss Cost must be attached.