

Commonwealth of Puerto Rico  
OFFICE OF THE COMMISSIONER OF INSURANCE  
P. O. Box 3508 - Old San Juan Station  
San Juan, Puerto Rico 00904

CIRCULAR LETTER NO. AM-I-8-561-73  
AUGUST 21, 1973

TO ALL INSURANCE COMPANIES AUTHORIZED TO TRANSACT  
AUTOMOBILE INSURANCE BUSINESS IN PUERTO RICO

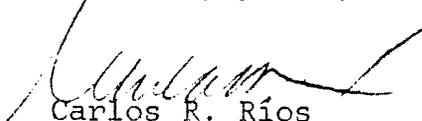
Dear Sirs:

Our Office has under consideration a revision to the Commercial Automobile Liability and Physical Damage Insurance Rates Manual. This revision affects commercial automobiles, Garage Hazard I and Hazard II, Public Livery, Private Livery and Taxicabs and School Buses.

Enclosed, please find blank forms in which specific information for the years ending 12/31/70, 12/31/71 and 12/31/72, is requested in order to determine if the proposed revision of rates meets with the requirements of Article 12.040(1)(b) of the Insurance Code of Puerto Rico.

The requested information must be submitted to this Office within the next thirty (30) days after the date of this circular letter. If no business was transacted, please state so in the form.

Cordially yours,



Carlos R. Ríos  
Commissioner of Insurance

Enclosure: Blank Forms for Statistical Report for  
Automobile Insurers





(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
			Private Livery Automobile							
12/31/70	B. I.									
12/31/71										
12/31/72										
	P. D.									
12/31/70										
12/31/71										
12/31/72										
	P. D.									
12/31/70										
12/31/71										
12/31/72										
	B. I.									
12/31/70										
12/31/71										
12/31/72										
	P. D.									
12/31/70										
12/31/71										
12/31/72										
			School Buses							
	B. I.									
12/31/70										
12/31/71										
12/31/72										
	P. D.									
12/31/70										
12/31/71										
12/31/72										

\* The information shall be submitted to the Commissioner of Insurance by the insurer. Arrangements should be made between the insurer and the statistical agent. The information must be signed by an officer of the company.

\*\* The information should be submitted as company total for all Commercial Automobile business. If this information is not available, an accurate estimate should be given.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature and Position