## APPENDIX

## EXHIBIT B

Consent to Higher Rate Filing Under N.J.S.A. 17:29A-7.1 (Chapter 14, P.L. 1962) New Jersey Department of Banking and Insurance - Automobile Insurance

-	Expiration Date	Expirat	41	Producer License #			Date	ם	roducer	Signature of Licensed NJ Producer	76.1
ature of Insured  Date  The insured and the correct application of the rating alty of N.J.S.A. 17:29A-22, I e applicant.	Date rect applicatio	d the cor	Signature of Insured by the insured and penalty of N.J.S.A. by the applicant.	Signat The rating information shown above truly reflects information supplied by the system in effect for the New Jersey Automobile Insurance Plan. Under penal declare that this application was fully completed as shown, before signed by the	reflects inforr obile Insuranc eted as shown,	n above truly Jersey Antomo as fully compl	nformation shown fect for the New c this application w	The rating i system in ef declare that	d Producer:	Sign Statement by Company and Producer: The rating information shown above truly reflects information supplied by system in effect for the New Jersey Antomobile Insurance Plan. Under pendeclare that this application was fully completed as shown, before signed by the	F#
a would normally apply because of the greater hazard	because of t	lly apply	would norma		us application	Payable' on ti	own as 'Premium	e premium sb	"I consent to the involved."	Statement by Insured: "I consent to the premium shown as 'Premium Payable' on this application which is higher that	re.
	рапу.	o the com	dily available to the company.	The information in columns (2) to (7) may be shown on any other form, such as a computer printout if not readi	as a compute	her form, such	e shown on any ot	) to (7) may b	columns (2)	Note: The information in	
						g Record.	Abstract of Driving	on Attached / otection.	oints Based o	** Specify:  ** Number of Surcharge Points Based on Attached Abstract of Driving Record.  o/ Including Basic Personal Injury Protection.	
							:			U.M.	,
										Add'l PIP Option #	*
										Collision Car #1	pros.
										Comprehensive Car #1	_
										Car #2	
										Car #2	=
		ē								Bodily Injury o/ Car #1	-
	Payable	Add'l	Normal	Age Symbol	Limits	Points**	Discounts*	Terr.	Class	Coverages Applied For	^
	(10)	9	(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)	E
				ce No.	ess - Referen	Name and Address - Reference No.	<b>X</b> 2				
						i vactore as	-			Agent or Broker	'T-
					Name and Address	Name a				Histori Cu	<b>)</b> -
					Name and Address	Name a			-		<b>⊣</b>
										Company	$\sim$
			-				-				

Signature of Company Representative

Date