



September 7, 2016

Jennifer Essary
Montague County Auditor
PO Box 56
Montague, TX 76251-0056

Re: Montague County – Liability Renewal Questionnaire

Thank you for participating in TAC Risk Management Pool's Liability Programs. As we prepare your January 2017 renewal, there are a few questions we need you to answer so that we can provide you the most comprehensive and cost effective Liability coverage possible. To ensure that we have up-to-date information, please fill out each page completely and make any changes directly to the document. You can also provide supplemental sheets as necessary. Please note that omitted information may result in an exclusion from coverage.

The Interlocal Participation Agreement, Section 4. Annual Contribution, 4.01 requires that the member timely submit to the Pool documentation necessary for the Pool to properly underwrite the renewal.

Some of the new Liability Coverage enhancements that we are presenting this year are:

- **Unmanned Aircraft:** Endorsements are now available under your Law Enforcement and General Liability coverage. If you have questions or need to add an Unmanned Aircraft, contact your Member Service Representative for further information.
- **Cyber Coverage:** Increased the limit for regulatory penalties and claims expenses under your Cyber Liability Coverage to a combined limit of \$250,000
- **General Liability:** Increased sublimit for Damage to Rented Premises from \$50,000 to \$100,000
- **General Liability:** Increased sublimit for Employee Benefits Liability from \$100,000 to \$500,000
- **Public Official and Law Enforcement Liability:** Amended wording for retro-active dates to reflect that full prior acts are provided unless otherwise noted on the CCD



Please complete the Liability Renewal Questionnaire and return it and any supplemental documents within 30 days. If you need help completing the Liability Renewal Questionnaire, please contact me at 800-456-5974 or kathiel@county.org.

We value your membership in the TAC Risk Management Pool and look forward to another successful year! Please do not hesitate to contact me if you would like to discuss your coverage options.

Sincerely,

A handwritten signature in cursive script that reads "Kathie Lopez".

Kathie Lopez

Member Service Representative



TEXAS ASSOCIATION *of* COUNTIES RISK MANAGEMENT POOL

Liability Renewal Questionnaire

Member: Montague County

Coverage Period: January 8, 2017 through January 8, 2018

Thank you for participating in the TAC Risk Management Pool's Liability program. As we prepare your renewal, there are a few questions we need you to answer so that we can provide you the most comprehensive and cost effective coverage possible. Pursuant to the Interlocal Participation Agreement, Section 4. Annual Contribution, 4.01 requires that the member timely submit to the Pool documentation necessary for the Pool to properly underwrite the renewal. To ensure that we have up-to-date information, please fill out each page completely and make any changes directly to this document. You can also provide supplemental sheets as necessary. **NOTE: Omitted information may result in an exclusion from coverage.**

The following coverage is eligible for renewal:

- Law Enforcement Liability

We value your membership in the TAC Risk Management Pool and look forward to another successful year! If you have any questions or need help completing the Renewal Questionnaire, please contact your Member Services Representative Kathie Lopez at 800-456-5974 or kathiel@county.org.

Pool Coordinator

Our records indicate that the Member has designated the individual below as the Pool Coordinator for this coverage. In accordance with the terms of the Interlocal Participation Agreement, the Pool Coordinator has express authority to represent and to bind the Member, and the Pool will not be required to contact any other individual regarding matters arising from or related to this Agreement. If the Member wishes to change or update the Pool Coordinator information, please make the necessary changes below.

Pool Coordinator: Jennifer Essary

Email: jessarymca@gmail.com

Phone Number: (940) 894-6090

Fax Number: (940) 894-3110

Address: PO Box 56

City, State, Zip: Montague TX, 76251-0056

Liability Renewal Questions

1. Please update the total number of Montague County employees, including elected officials.

	Total	Airport	Hospital	
Full Time Employees:	47	0	0	Full Time = 35 or more hours per week
Part Time Employees:	21			Part Time = Less than 35 hours per week
Volunteers:	5			Volunteer = Actively serving

Law Enforcement Liability

Current Law Enforcement Liability Deductible: \$10,000

To make changes to your current Law Enforcement Liability coverage, please complete the section below:

Coverage	Currently Included	Add to Coverage	Reject from Coverage	Current Limit	Change Limit	Limit Options
Law Enforcement Liability	<input checked="" type="checkbox"/>			\$2,000,000	<input type="checkbox"/>	<input type="checkbox"/> \$2,000,000 <input type="checkbox"/> \$3,000,000
District Judge		<input type="checkbox"/> Add				
Additional Punitive Damage - Increased Limits (\$1,000,000)		<input type="checkbox"/> Add				
Unmanned Aircraft		<input type="checkbox"/> Add				

1. Please review the list of law enforcement departments and agencies below and add or delete as appropriate:

Example: Sheriff's Department, Constables' Offices, Detention Facilities

- Montague County Attorney's Office
- Montague County Constable's Office
- Montague County Employees Of The District Attorney's Office
- Montague County Juvenile Probation Department
- Montague County Sheriff's Office

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. If Unmanned Aircraft is selected, please complete the following for each Unmanned Aircraft:

- a. U.A.S./ Drone Model _____
- b. Weight in lbs including all attachments _____
- c. Year and Serial Number _____
- d. Description of use _____
- e. Operator Name _____
- f. Date of Receipt of FAA COA & Registration Number as applicable _____
- g. Total U.A.S./Drone flight hours _____
- h. Description of Training Certifications _____

3. Please provide below, the current number of Law Enforcement personnel for all law enforcement office, department, and agency listed above. If no Juvenile - Class B personnel are reported, coverage will not be provided for these personnel.

NOTE: Full time = 35 or more hours per week. Part Time = Less than 35 hours per week

Actively Engaged		Juvenile		Other		Reserves	
Include: sheriff, deputies, armed investigators, armed bailiffs, constables, jail admins, jailers, other front-line personnel.		Include: probation officers, detention center guards, boot camp instructors		Include: dispatchers, unarmed prosecutors, investigators, jail nurses, cooks, clerical, unarmed bailiffs, other personnel.		Include: all reserve and auxiliary officers and employees	
Class A	Full Time: 32	Class B	Full Time: 3	Class C	Full Time: 2	Class D	Full Time:
	Part Time: 4		Part Time:		Part Time:		Part Time:

4. Does Montague County participate in a Law Enforcement Task Force? Yes No

If yes, do you lead this Task Force? Yes No

Name of Law Enforcement Task Force: _____

5. Do you participate in a Mutual Aid Agreement? Yes No

If yes, list name of Mutual Aid Agreement _____

6. Is any law enforcement officer, office, department or agency for which coverage is requested under any criminal or administrative investigation? Yes No

If yes, provide details or circumstances which are unprivileged public information.

7. Does Montague County own a Jail Facility and/or Detention Facility? Yes No

If yes, who operates the Jail Facility? Montague County Sheriff

If yes, who operates the Detention Facility? N/A

If the Jail Facility or Detention Facility is privately operated, the Pool recommends Montague County request a currently dated Certificate of Insurance issued by the facility operator's insurance agent or company that names the County as an Additional Insured and includes the following coverage as applicable:

- General Liability
- Professional Liability
- Employment Practices Liability
- Property (if the County owns the building)

8. If Montague County operates a Jail Facility and/or Detention Facility, please provide a copy of the Certificate of Compliance from the Texas Commissions of Jail Standards.

9. If a copy of the Certificate of Compliance is not held, attach information on actions being taken to bring facility into compliance. NOTE: Failure to provide Certificate of Compliance from the Texas Commissions of Jail Standards may result in the jail being excluded from coverage.

Unreported Claims

Are you, or any officer or employee, aware of, or have knowledge of any circumstance, occurrence, fact or event which is likely to be a basis of a claim, either now or in the future? Yes No

If yes, please describe:

Has the situation been reported to TAC Claims Department? Yes No

Acknowledgement and Acceptance

Montague County (Member) acknowledges that the information submitted in this questionnaire and Auto Schedule is true and accurate, including all known potential claims. The information submitted may be used by the Pool in processing the renewal and in assessing the coverage needs of Member. The questions posed, or any wording of the questionnaire, should not and may not be relied upon by Member as implying that coverage exists for any particular claim or class of claims. The only coverage provided by the Pool to Member is as described in the applicable Coverage Document, including any endorsements and the Contribution and Coverage Declaration, issued to a covered Member.

Member acknowledges and agrees that vehicles not listed on the attached vehicle schedule, and/or additionally identified by Member as an update to the attached vehicle schedule, will not be provided coverage during the Coverage Period.

If Member makes no changes, the Pool will assume Member is requesting renewal for the same Liability Coverage as in the previous applicable Coverage Period. Member understands that any failure to fully and accurately answer the questionnaire and any attached schedules may result in denial of coverage provided by the Pool. Coverage issued for Public Officials Liability and Law Enforcement Liability will apply on a Claims Made Basis.



Signature of County Judge or presiding official of the Political Subdivision

Date

ANNUAL JAIL REPORT

County: <u>Montague</u>	
Sheriff: <u>Paul Cunningham</u> email: <u>pcunningham@montaguesheriff.com</u>	Judge: <u>Rick Lewis</u> email: <u>co.judge@co.montague.tx.us</u>
Jail Administrator: <u>Carolyn Berryman</u> email: <u>cherryman@montaguesheriff.com</u>	Inspector: <u>Jackie Semmier</u>

Last Inspection November 18, 2014 Compliant Yes Inspection Date(s) January 17, 2015
 Remedial Order N/A Effect: _____

Reportable Incidents <small>(Previous 12 month history)</small>	Fires <u>0</u>	Escapes <u>0</u>	Contract Inmates Housed	FOR County1 _____
	Deaths <u>0</u>	Walkaway <u>0</u>		FOR County2 _____
	Suicides <u>0</u>	Secured <u>0</u>		County3 _____
				County4 _____
			County5 _____	
			County6 _____	

Date Plans Approved July 26, 2012

1. Facility Name Montague County Jail
 Address 100 Grand, Montague, TX Zip Code 76261
 Phone # (840) 894-2871 Fax # (840) 894-8448
 Built 1982 Renovated N/A Addition N/A
 Type Max Number of Variances 0

Drill Time 48 sec
 Facility Capacity 101
 Average Daily Population 63
 Housing Total this Date 63
 Holding Total this Date 1

2. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____


Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

3. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

<table style="width: 100%;"> <tr><td>Housing Capacity</td><td><u>101</u></td></tr> <tr><td colspan="2" style="text-align: center;">Cells</td></tr> <tr><td>Sep Cells</td><td><u>5</u></td></tr> <tr><td>Single Cells</td><td><u>14</u></td></tr> <tr><td>M.O. Cells</td><td><u>13</u></td></tr> <tr><td>Dorms</td><td><u>0</u></td></tr> <tr><td>Neg Press Cells</td><td><u>0</u></td></tr> <tr><td>Medical Cells</td><td><u>0</u></td></tr> <tr><td colspan="2">Notes:</td></tr> </table>	Housing Capacity	<u>101</u>	Cells		Sep Cells	<u>5</u>	Single Cells	<u>14</u>	M.O. Cells	<u>13</u>	Dorms	<u>0</u>	Neg Press Cells	<u>0</u>	Medical Cells	<u>0</u>	Notes:		<table style="width: 100%;"> <tr><td>Holding Capacity</td><td><u>16</u></td></tr> <tr><td colspan="2" style="text-align: center;">Cells</td></tr> <tr><td>Holding Cells</td><td><u>2</u></td></tr> <tr><td>Detoxification Cells</td><td><u>2</u></td></tr> <tr><td>Violent Cells</td><td><u>0</u></td></tr> </table>	Holding Capacity	<u>16</u>	Cells		Holding Cells	<u>2</u>	Detoxification Cells	<u>2</u>	Violent Cells	<u>0</u>	<table style="width: 100%;"> <tr><td>Females</td><td><u>13</u></td></tr> <tr><td colspan="2" style="text-align: center;"><small>(Female Population Today)</small></td></tr> <tr><td># of Cells</td><td><u>2</u></td></tr> <tr><td># of Bunks</td><td><u>20</u></td></tr> </table>	Females	<u>13</u>	<small>(Female Population Today)</small>		# of Cells	<u>2</u>	# of Bunks	<u>20</u>
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Population: Housing 63 Hold/Detox/Violent 1 Total System Population 64
(During Inspection)
 Total Inspection Time 9.5 hours Total Average Daily Population 63.00


 Carolyn Berryman
 Jail Administrator

Interview with Court Representative Yes No

 Court Representative



Texas Commission on Jail Standards

Montague County Jail

Montague, Texas

November 17, 2015

Date(s) of Inspection

SUBJECT: INSPECTION REPORT

State Law requires periodic inspections of county jail facilities (VTCA, Local Government Code, Chapter 351, VTCA, Government Code, Chapter 511; Chapter 297.8, Texas Commission on Jail Standards).

- The facility was inspected on the date(s) indicated above, and it was determined that deficiencies exist. You are urged: (1) to give these areas of noncompliance your serious and immediate consideration; and (2) to promptly initiate and complete appropriate corrective measures. The Commission is available to discuss or assist you with the appropriate corrective measures required.

Failure to initiate and complete corrective measures following receipt of the Notice of Noncompliance may result in the issuance of a Remedial Order (Chapter 297.8, et seq.).

- This facility was inspected on the date(s) indicated above. There were no deficiencies noted and upon review of this report by the Executive Director of the Texas Commission on Jail Standards, a certificate of Compliance may be issued per the requirements of VTCA, Chapter 511 and Texas Minimum Jail Standards.

Authenticated:

Inter-Office Use Only

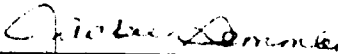

Jackie Semmler, TCJS Inspector

Received by: _____	_____ Date
Reviewed by: _____	_____ Date

cc: Judge
Sheriff

Individuals and/or entities regulated by the Texas Commission on Jail Standards shall direct all complaints regarding the commission procedures and functions to the Executive Director at: P.O. Box 12985 Austin, Texas 78711 (512) 463-5505 Fax (512) 463-3185 or at our agency website at www.tcjs.state.tx.us.

TEXAS COMMISSION ON JAIL STANDARDS - INSPECTION REQUIREMENTS REVIEW



Jackie Semmler, TCJS Inspector

Facility Name: Montague County Jail

Date: November 17, 2015

Chapter	Title	Comments
259	New Construction	Conducted a walk through inspection of the facility.
261	Existing Construction	Not applicable.
263	Life Safety	Inspected life safety equipment and conducted and observed emergency drill. Reviewed documentation. Conducted staff interviews.
265	Admission	Reviewed a random sample of 6 inmate files. Interviewed staff. Reviewed policy.
267	Release	Reviewed a random sample of 6 inmate files. Interviewed staff.
269	Records/Procedures	Reviewed policy and documentation. Interviewed staff and reviewed ADA compliance evaluation. Provided staff with life safety form. <u>Technical assistance provided.</u> This inspector provided technical assistance in reference to the Veterans Re-Entry System service deadline dates and the monthly miscarriage report. Staff will attend the conference call on November 20, 2015. After reviewing medical records it was determined that procedures were changed in October and the nurse and jailers do not initial the MARS when medication is dispensed to inmates. Issue was addressed and corrected on site. The nurse and staff will begin to initial the MARS indicating that they dispensed medications. <u>Follow up action required-</u> The jail administrator will send an email once the VRSS account has been activated and they are submitting reports, but no later November 27, 2015. This inspector will follow up within 30-60 days and review a random selection of medication administration records.
271	Classification	Reviewed a random selection of 6 inmate files. Reviewed staff training records. Reviewed internal classification audits. Reviewed policy. Interviewed staff. <u>Technical assistance provided.</u> Ensure that it is documented when jailers receive four hour objective jail classification training. Staff was unable to provide documentation that jailers received training in accordance with minimum jail standards. <u>Follow up action required-</u> Staff will conduct a four hour objective jail classification training for jailers that have not received training no later than December 31, 2015. Classification will only be conducted by Capt. Berryman, Jean Myers and Clint Cearley until all other jailers are trained. It was recommended that all jailers complete the online training provided by TEEX.
273	Health Services	Reviewed a random selection of 6 files. Interviewed staff and inmates. Reviewed training records. Reviewed policy. <u>Technical assistance provided.</u> Ensure that the county employees that utilize inmates for work crews are tested annually for tuberculosis. It was determined that the county employees are not tested annually. Issue was addressed and corrected on site. The county employees were tested prior to the conclusion of the annual inspection. <u>Follow up action required-</u> The jail administrator will scan and email the final results to this inspector no later than Friday November 20, 2015.
275	Supervision	Reviewed a random selection of 22 officer TCOLE certification records. Reviewed officer documentation. Interviewed staff.
277	Personal Hygiene	Conducted a facility walk through. Reviewed facility schedule.
279	Sanitation	Conducted a facility walk through. Interviewed staff and inmates. Reviewed policy.
281	Food Service	Conducted walk through inspection in kitchen area. Interviewed staff. Reviewed documentation.
283.1	Discipline	Reviewed 15 disciplinary hearing records. Interviewed staff and inmates. Reviewed policy. Reviewed inmate rules.
283.3	Grievance	Reviewed 15 inmate grievance/complaints. Reviewed policy. Interviewed staff and inmates.
285	Exercise	Walk through of exercise area conducted. Reviewed documentation. Interviewed staff and inmates. <u>Technical assistance provided.</u> Ensure that jailers are documenting the time in and time out when offering trusty's physical recreation. Issue was addressed on site. <u>Follow up action required-</u> This inspector will follow up within 30-60 days and review documentation.

TEXAS COMMISSION ON JAIL STANDARDS - INSPECTION REQUIREMENTS REVIEW

287	Education/Library	Reviewed policy and schedule. Interviewed staff and inmates.
289	Work Assignments	Reviewed policy and schedule. Interviewed staff and inmates.
291.1	Telephone	Reviewed policy and schedule. Interviewed staff and inmates.
291.2	Correspondence	Reviewed policy and schedule. Interviewed staff and inmates.
291.3	Commissary	Reviewed policy and schedule. Interviewed staff and inmates.
291.4	Visitation	Reviewed policy and schedule. Interviewed staff and inmates.
291.5	Religious Practices	Reviewed policy and schedule. Interviewed staff and inmates.
xxx	Variances	Not applicable.
xxx	Remedial Orders	Not applicable.
xxx	Complaints	Not applicable.
xxx	CCQ	CCQ inquiries are being submitted through TLETS as required.