



August 31, 2017

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 2018 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:

- **Cyber Coverage:** Increased the main limit from \$1,000,000 to \$2,000,000 and renamed to Privacy and Security Liability and Expense coverage.
- **General Liability:** Incorporated coverage for law enforcement watercraft into the main coverage document.
- **Public Official and Law Enforcement Liability:** Expanded coverage for malicious or criminal act or omission. Also incorporated punitive damages into the main limit of liability.

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 sabrinae@county.org.



We value your continued participation 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 "Sabrina Pena".

Sabrina Pena

Member Service Representative



TEXAS ASSOCIATION of COUNTIES RISK MANAGEMENT POOL

Liability Renewal Questionnaire

Member: Montague County

Coverage Period: January 8, 2018 through January 8, 2019

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 Sabrina Pena at 800-456-5974 or sabrinae@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 Rick Lewis	Email: j.essary@co.montague.tx.us L. MOORE@CO.MONTAGUE.TX.US
Phone Number: (940) 894-6090 940-894-2401	Fax Number: (940) 894-3110 940-894-3999
Address: PO Box 56 P.O. Box 475	City, State, Zip: Montague TX, 76251-0056 Montague, TX 76251

Liability Renewal Questions

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

	Total	Airport	Hospital	
Full Time Employees:	99	0	0	Full Time = 35 or more hours per week
Part Time Employees:	20			Part Time = Less than 35 hours per week
Volunteers:	0			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				
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 _____
- d. Description of use _____
- e. Operator Name _____
- f. Date of Receipt of FAA COA- copy will need to be submitted _____
- 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:	28	Class B	Full Time:	3	Class C	Full Time:	7	Class D	Full Time:	
	Part Time:	2		Part Time:	0		Part Time:	1		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 Co. Sheriff

If yes, who operates the Detention Facility? _____

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

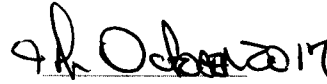
Montague County (Member) acknowledges that the information submitted in this questionnaire and Auto Schedule is true and accurate, including all known potential claims. The information submitted may be used by the Pool in processing the renewal and in assessing the coverage needs of Member. The questions 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