



# TEXAS ASSOCIATION *of* COUNTIES RISK MANAGEMENT POOL

## Application for Property Coverage

*If you have questions regarding completion of this application, please contact us at: 1-800-456-5974; Facsimile Line: 1-512-478-1426; or E-mail: TACPools@county.org  
Please return this completed application to: Texas Association of Counties Risk Management Pool, P.O. Box 2131, Austin, Texas 78768*

### General Information

1. Name of Political Subdivision: \_\_\_\_\_
2. Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_
3. Contact Person: \_\_\_\_\_  
Contact:     a) Telephone Number: \_\_\_\_\_ b) Fax Number: \_\_\_\_\_  
                  c) E-mail Address: \_\_\_\_\_
4. Date Quotation is required: \_\_\_\_\_
5. Is a regular building maintenance program in operation?     \_\_\_\_\_ Yes     \_\_\_\_\_ No

### Coverage Information

6. Desired Effective Date: \_\_\_\_\_
7. Deductible desired:    \_\_\_ \$1,000     \_\_\_ \$2,500     \_\_\_ \$5,000     \_\_\_ Other \$ \_\_\_\_\_
8. Coverages desired:    \_\_\_ Building & Contents (includes Equipment Breakdown)  
                                  \_\_\_ EDP Equipment (Hardware)  
                                  \_\_\_ Mobile Equipment

Forward a complete schedule for these coverages, to include the following information:

- |                           |   |
|---------------------------|---|
| Building & Contents:      | Location Address, Zip Code, Occupancy, Year Built, Construction, Square Footage, Number of Stories, Sprinkler Information, and separate Replacement Cost Values for building and for contents for each location<br><b>PLEASE NOTE THAT IN THE EVENT OF A TOTAL LOSS TO ANY STRUCTURE, THE MAXIMUM THE POOL WILL REIMBURSE YOU FOR THAT LOSS IS THE VALUE SHOWN ON THE SCHEDULE.</b> |
| Mobile Equipment:         | Year, Make, Model or Other Description, Serial Number, and Replacement Cost Value (separately for each item)  |
| EDP Equipment (Hardware): | Location Address, Description, Serial Number, and Replacement Cost Value (separately for each item)   |

## Coverage Information

9. The coverages listed below are automatically included. Please note the automatic sub-limits provided and indicate higher limits where desired.

**GROSS EARNINGS & EXTRA EXPENSE: (AUTOMATICALLY INCLUDED COMBINED LIMIT IS \$500,000)**

The additional amount that would be needed to temporarily continue operations if a premises were totally destroyed. This includes the cost of renting temporary space, furniture, etc.

Indicate a higher combined limit here, if desired: \$ \_\_\_\_\_

**ACCOUNTS RECEIVABLE: (AUTOMATICALLY INCLUDED LIMIT IS \$250,000)**

Estimated loss of collections (accounts receivable) due to loss of records, plus excess collection expenses to help collect outstanding amounts, and estimated interest expense for loans used to offset the effect of delayed collections.

Indicate a higher limit here, if desired: \$ \_\_\_\_\_

**VALUABLE PAPERS, RECORDS & EDP MEDIA: (AUTOMATICALLY INCLUDED COMBINED LIMIT IS \$100,000)**

**VALUABLE PAPERS:**

The amount that would be incurred to restore written, printed or otherwise inscribed documents and records, including books, maps, films, drawings, abstracts, deeds, mortgages, and manuscripts, but does not mean money or securities, nor data not defined above.

**EDP MEDIA/SOFTWARE:**

The replacement cost that would be incurred to restore all materials on which data is recorded including magnetic tapes, disc packs, paper tapes and cards used in data processing equipment.

Indicate a higher combined limit here, if desired: \$ \_\_\_\_\_

PLEASE SEND THIS APPLICATION TO:  
TEXAS ASSOCIATION OF COUNTIES RISK MANAGEMENT POOL  
P.O. BOX 2131  
AUSTIN, TEXAS 78768  
TEXAS TOLL FREE: (800) 456-5974  
FAX: (512) 478-1426  
[www.county.org](http://www.county.org)