

Property Renewal Schedule

Member: Tyler County

Coverage Period: 07/01/2024 - 07/01/2025

N. I. N		
Member Name: Tyler County	Pool Coordinator: Mrs. Jackie Skinner	
	Email: jskinner.aud@co.tyler.tx.us	
Instru	uctions for Completion	
Review each tab and update as needed.		
2) Include Declarations page for any National	Flood Insurance Program coverage in force.	
Email completed questionnaire by April 1, 2	2024 to: TACRMP@county.org or nellyc@county.org	
All entries are subject to approval, further infor	mation may be requested upon review.	
If this schedule is not received by April 1, 2 changes handled by endorsement.	024, coverage will be renewed as it currently stands	with any requeste
Your Member Services Representative is available 1-800-456-5974.	e to assist you with any questions or concerns and can be rea	nched at
Property Renewal Questions		Yes or No
for buildings reported?	onstruction or plan to undergo any major construction m #, cost of project and estimated project completion	NO
Are any owned buildings currently vacant?If yes, please identify the building item # and	I is the building being maintained and secured?	NO

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Unreported Claims	Yes or No
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? If yes, please describe:	NO
Has the situation been reported to TAC Claims Department?	N/A
Acknowledgement and Acceptance	
Member Name: Tyler County	
Member acknowledges that the information submitted in this questionnaire is true and accurate, in potential claims. The information submitted may be used by the Pool in processing the renewal a coverage needs of the Member. The questions posed, or any wording of the questionnaire, should relied upon by the Member as implying that coverage exists for any particular claim or class of claim provided by the Pool to the Member is as described in the applicable Coverage Document, include the Contribution and Coverage Declaration, issued to a covered Member.	nd in assessing the ld not and may not be iims. The only coverage
17 / Alexander	3-19-24
Signature of County Judge or presiding official of the Political Subdivision	Date