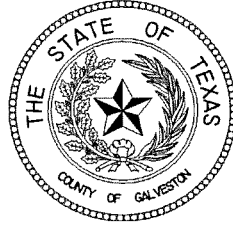


**GALVESTON COUNTY  
PURCHASING DEPARTMENT**



**REQUEST FOR PROPOSAL:**

**RFP #B142023**

**PROPERTY & CASUALTY INSURANCE**

**PROPOSAL DUE DATE: 10/16/2014  
2:00 P.M.**

***Rufus Crowder, CPPO, CPPB  
Purchasing Agent  
Galveston County  
722 Moody (21<sup>st</sup> Street)  
Fifth (5<sup>th</sup>) Floor  
Galveston, Texas 77550  
(409) 770-5372***



RFP #B142023  
OPEN: 10/16/2014  
TIME: 2:00 P.M.

## **REQUEST FOR PROPOSAL PROPERTY & CASUALTY INSURANCE GALVESTON COUNTY, TEXAS**

Sealed proposals in sets of five (5), one (1) original and four (4) copies, will be received in the office of the Galveston County Purchasing Agent until 2:00 P.M. CST, on 10/16/2014, and opened immediately in that office in the presence of Galveston County Auditor and the Purchasing Agent. Sealed proposals are to be delivered to Rufus G. Crowder, CPPO CPPB, Galveston County Purchasing Agent at the Galveston County Courthouse, 722 Moody, (21<sup>st</sup> Street), Floor 5, Purchasing, Galveston, Texas 77550, (409) 770-5372. **The time stamp clock located in the Purchasing Agent's office shall serve as the official time keeping piece for this solicitation process. Any proposals received after 2:00 P.M. on the specified date will be returned unopened.**

**Purpose:**

**The County of Galveston is seeking an agent or agency to provide property and casualty insurance coverage quotations as requested within the specifications.**

All proposals must be marked on the outside of the envelope:

**RFP #B142023**

**PROPERTY & CASUALTY INSURANCE**

Proposers name, return address, and the enclosed label should be prominently displayed on the proposal package for identification purposes.

Specifications can be obtained on application at the office of the Galveston County Purchasing Agent, located in the Galveston County Courthouse, 722 Moody, (21<sup>st</sup> Street), Floor 5, Purchasing, Galveston, Texas, 77550, or by visiting the Galveston County website @ <http://www.galvestoncountytexas.gov/pu/Pages/BidListings.aspx>.

Proposal prices shall be either lump sum or unit prices as shown on proposal bid sheets, if applicable. The net price shall be delivered to Galveston County, including all freight, shipping, and license fees. Galveston County is tax exempt and no taxes should be include in proposal pricing.

Upon satisfaction of contractual terms (e.g., goods delivered in promised condition, services rendered as agreed, etc.), contractor shall be paid via Galveston County's normal accounts payable process.

**Bonding Requirements:**

No bond is required for this Request for Proposal.

The Galveston County Commissioners' Court reserves the right to waive any informality and to reject any and all proposals, and to accept the proposal which, in its opinion, is most advantageous to Galveston County with total respect the governing laws.

Rufus G. Crowder, CPPO CPPB  
Purchasing Agent  
Galveston County

**PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**Table of Contents**

GENERAL PROVISIONS:

1. PROPOSAL PACKAGE ..... 1

2. PROPOSER’S RESPONSIBILITY ..... 1

3. TIME FOR RECEIVING PROPOSALS ..... 1

4. PROPOSAL OPENING ..... 1

5. COMMISSIONERS’ COURT ..... 1

6. REJECTION OF PROPOSALS/DISQUALIFICATION ..... 2

    A.Failure to use the proposal form(s) furnished by the County; ..... 2

7. RESTRICTIVE OR AMBIGUOUS SPECIFICATIONS..... 2

8. SUBSTITUTES/DESCRIPTION OF MATERIALS AND EQUIPMENT ..... 2

9. EXCEPTIONS TO PROPOSAL ..... 2

10. PRICING ..... 3

11. PROCUREMENT CARD PROGRAM ..... 3

12. PASS THROUGH COST ADJUSTMENTS..... 3

13. MODIFICATION OF PROPOSALS ..... 3

14. SIGNATURE OF PROPOSALS..... 4

15. AWARD OF PROPOSALS – EVALUATION CRITERIA AND FACTORS ..... 4

16. DISPUTE AFTER AWARD/PROTEST ..... 5

17. PUBLIC INFORMATION ACT ..... 5

18. PROPOSER’S EMAIL ADDRESSES..... 5

19. RESULTANT CONTRACT ..... 5

20. CONTRACT TERM..... 6

21. TERMINATION FOR DEFAULT ..... 6

22. TERMINATION FOR CONVENIENCE ..... 6

23. FORCE MAJEURE..... 7

24. ESTIMATED QUANTITIES ..... 7

25. CONTRACTOR INVESTIGATION..... 7

26. NO COMMITMENT BY COUNTY OF GALVESTON..... 7

**PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

27.	PROPOSAL COSTS BORNE BY BIDDER/PROPOSER.....	7
28.	BEST AND FINAL OFFERS (BAFO).....	7
29.	SINGLE PROPOSAL RESPONSE .....	8
30.	CHANGES IN SPECIFICATIONS.....	8
31.	PROPOSAL IDEAS AND CONCEPTS.....	8
32.	PROPOSAL DISCLOSURES.....	8
33.	WITHDRAWAL OF PROPOSAL.....	8
34.	INDEMNIFICATION .....	8
35.	REQUIREMENT OF AND PROOF OF INSURANCE .....	9
36.	PATENT AND COPYRIGHT PROTECTION .....	10
37.	CONFLICT OF INTEREST DISCLOSURE REPORTING .....	10
38.	COMPETITIVENESS AND INTEGRITY .....	11
39.	ENTIRETY OF AGREEMENT AND MODIFICATION .....	12
40.	NON-COLLUSION AFFIDAVIT .....	12
41.	SOVEREIGN IMMUNITY .....	12
42.	CONTROLLING LAW AND VENUE .....	12
43.	MERGERS, ACQUISITIONS .....	13
44.	DELAYS.....	13
45.	ACCURACY OF DATA.....	13
46.	SUBCONTRACTING/ASSIGNMENT.....	13
47.	INDEPENDENT CONTRACTOR.....	13
48.	MONITORING PERFORMANCE .....	13
49.	PROCUREMENT ETHICS .....	13
50.	SUBJECT TO APPROPRIATION OF FUNDS .....	15
51.	NOTICE.....	15
52.	NONDISCRIMINATION .....	16
53.	RECORD RETENTION AND RIGHT TO AUDIT.....	17
54.	TITLE VI ASSURANCES/TxDOT.....	17
55.	CERTIFICATION REGARDING DEBARMENT, SUSPENSION, PROPOSED DEBARMENT, AND OTHER RESPONSIBILITY MATTERS.....	18
56.	SECTION 231.006, FAMILY CODE/DELINQUENT CHILD SUPPORT .....	18

**PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

57. LABOR STANDARDS .....18  
General Requirements and Instructions

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**1. PROPOSAL PACKAGE:**

*The request for proposal, general and special provisions, drawings, specifications/line item details, contract documents and the proposal sheet are all part of the proposal package. Proposals must be submitted in sets of five (5), one (1) original and four (4) copies on the forms provided by the County, including the proposal sheets completed in their entirety and signed by an authorized representative by original signature. Failure to complete and sign the proposal sheets/contract page(s) may disqualify the proposal from being considered by the Commissioners' Court. Any individual signing on behalf of the proposer expressly affirms that he or she is duly authorized to tender this proposal and to sign the proposal sheet/contract under the terms and conditions in this proposal. Proposer further understands that the signing of the contract shall be of no effect unless subsequently awarded and the contract properly executed by the Commissioners' Court. All figures must be written in ink or typed. Figures written in pencil or with erasures are not acceptable. However, mistakes may be crossed out, corrections inserted, and initialed in ink by the individual signing the proposal. If there are discrepancies between unit prices quoted and extensions, the unit price will prevail. Each proposer is required to thoroughly review this entire proposal packet to familiarize themselves with the proposal procedures, the plans and specifications for the requested work as well as the terms, and conditions of the contract the successful proposer will execute with the County.*

**2. PROPOSER'S RESPONSIBILITY**

The Proposer must affirmatively demonstrate its responsibility. The Proposer must also meet the following minimum requirements:

- A. have adequate financial resources or the ability to obtain such resources as required;
- B. be able to comply with all federal, state, and local laws, rules, regulations, ordinances and orders regarding this Request for Proposal;
- C. have a satisfactory record of performance;
- D. have a satisfactory record of integrity and ethics;
- E. and be otherwise qualified and eligible to receive an award.

**3. TIME FOR RECEIVING PROPOSALS:**

Proposals received prior to the submission deadline will be maintained unopened until the specified time for opening. If the proposer fails to identify the Proposal Number on the outside of the envelope as required, the Purchasing Agent will open the envelope for the sole purpose of identifying the proposal number for which the submission was made. The envelope will then be resealed. No liability will attach to a County office or employee for the premature opening of a proposal. If you do not submit a proposal, return this Request for Proposal and state reason, otherwise your name may be removed from the Purchasing Agent's mailing list.

**4. PROPOSAL OPENING:**

Only the names of proposers will be read at the opening. The Purchasing Agent will examine proposals promptly and thoroughly. No proposal may be withdrawn for a period of sixty (60) calendar days of the proposal opening date.

**5. COMMISSIONERS' COURT:**

No contract is binding on the County until it is properly placed on the Commissioners' Court agenda, approved in open Court, authorized to be executed by the County Judge, and fully executed by both parties. Department heads and elected officials are not authorized to enter into any type of agreement or contract on behalf of the County. Only the Commissioners' Court acting as a body may enter into a contract on behalf of and contractually bind the County. Additionally, department heads and elected officials are not authorized to agree to any type of supplemental agreements or contracts for goods or services. Supplemental agreements are subject to review by the County Legal Department prior to being accepted and signed by the County's authorized representative.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**6. REJECTION OF PROPOSALS/DISQUALIFICATION:**

Galveston County, acting through its Commissioners' Court, reserves the right to: reject any and all proposals in whole or in part received by reason of this request for proposal, to waive any informality in the proposals received, to disregard the proposal of any proposer determined to be not responsible, and/or to discontinue its efforts for any reason under this proposal package at any time prior to actual execution of contract by the County. Proposers may be disqualified and rejection of proposals may be recommended to the Commissioners' Court for any of (but not limited to) the following causes:

Failure to use the proposal form(s) furnished by the County;

- A. Lack of signature by an authorized representative on the proposal form(s);
- B. Failure to properly complete the proposal;
- C. Proposals that do not meet the mandatory requirements; and/or;
- D. Evidence of collusion among proposers.

**7. RESTRICTIVE OR AMBIGUOUS SPECIFICATIONS:**

It is the responsibility of the prospective proposer to review the entire invitation to proposal packet and to notify the Purchasing Department if the specifications are formulated in a manner that would restrict competition or appear ambiguous. Any protest or question(s) regarding the specifications or proposal procedures must be received in the Purchasing Department not less than seventy-two (72) hours prior to the time set for proposal opening. Vendors are to submit proposal as specified herein or propose an approved equal.

**8. SUBSTITUTES/DESCRIPTION OF MATERIALS AND EQUIPMENT:**

Any brand name or manufacturer reference used herein is intended to be descriptive and not restrictive, unless otherwise noted, and is used to indicate the type and quality of material. The term "or equal" if used, identifies commercially produced items that have the essential performance and salient characteristics of the brand name stated in the item description. All supplies, material, or equipment shall be new and of the most suitable grade for the purpose intended. It is not the County's intent to discriminate against any materials or equipment of equal merit to those specified. However, if Proposer desires to use any substitutions, prior written approval must be obtained from the County Purchasing Agent and sufficiently in advance such that an addendum may be issued. All material supplied must be one hundred percent (100%) asbestos free. Bidder/Proposer, by submission of its bid/proposal, certifies that if awarded any portion of this procurement, the bidder/proposer will supply only material and equipment that is 100% asbestos free.

**9. EXCEPTIONS TO PROPOSAL:**

The proposer will list on a separate sheet of paper any exceptions to the conditions of the proposal. This sheet will be labeled, "Exceptions to Proposal Conditions", and will be attached to the proposal. If no exceptions are stated, it will be understood that all general and specific conditions will be complied with, without exception.

The Proposer must specify in its proposal any alternatives it wishes to propose for consideration by the County. Each alternative should be sufficiently described and labeled within the proposal and should indicate its possible or actual advantage to the program being offered.

The County reserves the right to offer these alternatives to other proposers.

*The remainder of this page intentionally left blank*

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**10. PRICING:**

Proposals will be either lump sum or unit prices as shown on the proposal sheet. The net price will be delivered to Galveston County, including all freight or shipping charges. Cash discount must be shown on proposal, otherwise prices will be considered net. Unless prices and all information requested are complete, proposal may be disregarded and given no consideration. In case of default by the contractor, the County of Galveston may procure the articles or services from other sources and may deduct from any monies due, or that may thereafter become due to the contractor, the difference between the price named in the contract of purchase order and the actual cost thereof to the County of Galveston. Prices paid by the County of Galveston shall be considered the prevailing market price at the time such purchase is made. Periods of performance may be extended if the facts as to the cause of delay justify such extension in the opinion of the Purchasing Agent and the Commissioners' Court.

**11. PROCUREMENT CARD PROGRAM:**

The County of Galveston participates in a Procurement Card (P-Card) program that allows payments made to a vendor by credit card. This method normally results in substantially faster bill payments, sometimes within three (3) to five (5) days of the actual transaction date. If your company will accept payment via credit card (Visa, MasterCard), please notate this in your proposal submittal.

**12. PASS THROUGH COST ADJUSTMENTS:**

Except in instances of extreme extenuating circumstances Contractor prices shall remain firm throughout the Contract period and any renewals. Examples of extreme extenuating circumstances include such situations as a nationwide rail strike, oil shortage or oil embargo.

In extreme extenuating circumstances, Contractors may be allowed to temporarily "pass through" additional costs they are forced to incur through no fault of their own. A request for a pass through cost increase will not be considered unless a Contractor's cost for his product exceeds 10% over the original cost for the product. Also, the increase in cost must be nationwide and consistent for a minimum period of sixty (60) days. Costs that historically are anticipated to rise over a period of time (for example only, such as wages or insurance costs) do not qualify for pass through. If a Contractor thinks he will be asking for a pass through cost adjustment during the term of the contract, then the original cost of the product to Contractor must be stated in Contractor's original proposal.

A request for a pass through cost does not guarantee that one will be granted. Contractors must submit such information on each request as is required by the County Purchasing Agent. The County Purchasing Agent will review each request on a case-by-case basis and determine the appropriateness of each request as well as amount and duration of increase. Contractors will not be permitted any additional compensation for mark-ups or profits based on the increase in price. Rather, such additional compensation will be limited to the actual increase in original cost to the Contractor as such increase is reflected by the original cost stated in the proposal. But in no event will the amount of additional compensation exceed 25% increase in Contractor's original cost for his product as such cost is reflected in Contractor's original proposal or the duration exceed a period of sixty (60) days. In addition, should, during the period of the pass through, cost return to normal or decrease to below pre pass through prices, appropriate downward adjustments will be made. No more than one pass through adjustment will be permitted per year.

**13. MODIFICATION OF PROPOSALS:**

A proposer may modify a proposal by letter at any time prior to the submission deadline for receipt of proposals. Modification requests must be received prior to the submission deadline. Modifications made before opening time must be initialed by proposer guaranteeing authenticity. Proposals may not be amended or altered after the official opening with the single exception that any product literature and/or supporting data required by the actual specifications, if any, will be accepted at any time prior to the Commissioners' Court considering of same.



**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**14. SIGNATURE OF PROPOSALS:**

Each proposal shall give the complete mailing address of the Proposer and be signed by an authorized representative by original signature with the authorized representative's name and legal title typed below the signature line. Each proposal shall include the Proposer's Federal Employer Identification Number (FEIN). Failure to sign the Contract page(s) and proposal response sheets may disqualify the proposal from being considered by the County. The person signing on behalf of the Proposer expressly affirms that the person is duly authorized to tender the proposal and to sign the proposal sheets and contract under the terms and conditions of this RFP and to bind the Proposer thereto and further understands that the signing of the contract shall be of no effect until it is properly placed on the Commissioners' Court agenda, approved in open Court, authorized to be executed by the County Judge, and fully executed by both parties.

**15. AWARD OF PROPOSALS – EVALUATION CRITERIA AND FACTORS:**

The award will be made to the responsible proposer whose proposal is determined to be the best evaluated offer demonstrating the best ability to fulfill the requirements set forth in this Request for Proposal. **The proposed cost to the County will be considered firm and cannot be altered after the submission deadline, unless the County invokes its right to request a best and final offer.**

Each proposer, by submitting a proposal, agrees that if their proposal is accepted by the Commissioners' Court, such proposer will furnish all items and services upon which prices have been tendered and upon the terms and conditions in this proposal and contract.

The contractor shall commence work only after the transmittal of a fully executed contract and after receiving written notification to proceed from the County Purchasing Agent. The contractor will perform all services indicated in the proposal in compliance with this contract.

Neither department heads nor elected officials are authorized to sign any binding contracts or agreements prior to being properly placed on the Commissioners' Court agenda and approved in open court. Department heads and other elected officials are not authorized to enter into any type of agreement or contract on behalf of Galveston County. Only the Commissioners' Court, acting as a body, may enter into a contract on behalf of the County. Additionally, department heads and other elected officials are not authorized to agree to any type of supplemental agreements or contracts for goods or services. Supplemental agreements are subject to review by the County Legal Department prior to being signed by the County's authorized representatives.

The County of Galveston reserves the right to accept proposals on individual items listed, or group items, or on the proposal as a whole; to reject any and all proposals; to waive any informality in the proposals; and to accept the proposal that appears to be in the best interest of the County. The selection process may, however, include a request for additional information or an oral presentation to support the written proposal.

In determining and evaluating the best proposal, the pricing may not necessarily be controlling, but quality, equality, efficiency, utility, general terms, delivery, suitability of the service offered, and the reputation of the service in general use will also be considered with any other relevant items. The Commissioners' Court shall be the sole judge in the determination of these matters.

The County reserves the right to reject any or all proposals in whole or in part received by reason of this RFP and may discontinue its efforts under this RFP for any reason or no reason or solely for the County's convenience at any time prior to actual execution of the contract by the County.

**A Proposer whose proposal does not meet the mandatory requirements set forth in this RFP will be considered non-compliant.**

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

The invitation to submit a proposal which appears in the newspaper, or other authorized advertising mediums, these general provisions, the specifications which follow, the proposal sheets, and any addenda issued are all considered part of the proposal.

Each Proposer, by submitting a proposal, agrees that if its proposal is accepted by the Commissioners' Court, such Proposer will furnish all items and services upon the terms and conditions in this RFP and the resultant contract.

Notice of contract award will be made within ninety (90) days of opening of proposals to the lowest responsive and responsible contractor, whose proposal complies with all the requirements in the Request for Proposals.

Contractor shall submit to the County, for approval, within ten (10) days from notice of contract award, all Certificates of Insurance evidencing the required coverage as described under Insurance in the schedule of the Requests for Proposals.

The contractor shall not commence work under these terms and conditions of the contract until all applicable Certificates of Insurance, Performance and Payment Bonds, and Irrevocable Letter of Credit (if required) have been approved by the County of Galveston and the Contractor has received notice to proceed in writing and an executed copy of the contract from the County Purchasing Agent.

**16. DISPUTE AFTER AWARD/PROTEST:**

Any actual or prospective Proposer who is allegedly aggrieved in connection with the solicitation of this RFP or award of a contract resulting therefrom may protest. The protest will be submitted in writing to the Purchasing Agent within seven (7) calendar days after such aggrieved person knows of or should have known of the facts giving rise thereto. If the protest is not resolved by mutual agreement, the Purchasing Agent will promptly issue a decision in writing to the protestant. If the protestant wishes to appeal the decision rendered by the Purchasing Agent, such appeal must be made to the Commissioners' Court through the Purchasing Agent. The decision of the Commissioners' Court will be final. The Commissioners' Court need not consider protests unless this procedure is followed.

**17. PUBLIC INFORMATION ACT:**

The parties agree that the County is a governmental body for purposes of the Public Information Act, codified as Chapter 552 of the Texas Government Code and as such is required to release information in accordance with the Public Information Act. Proposer agrees that it has **clearly and conspicuously** marked any information that it considers to be confidential, proprietary, and/or trade secret in its proposal. County agrees to provide notice to Proposer in accordance with the Public Information Act in the event the County receives a request for information under the Public Information Act for information that the Proposer has marked as confidential, proprietary, and/or trade secret.

**18. PROPOSER'S EMAIL ADDRESSES:**

Notwithstanding the foregoing Section 17, Proposer acknowledges and agrees that the confidentiality of any and all email addresses it uses or discloses in communicating with the County are open to the public in accordance with Section 552.137 of the Government Code and consents to the release of its email addresses.

**19. RESULTANT CONTRACT:**

Proposer shall correctly and fully execute the resultant contract first. After this, the contract shall be set for consideration by the Commissioners' Court. If the Commissioners' Court authorizes the execution of the contract, then the resultant contract shall become effective upon the Commissioners' Court execution of same. Contract documents shall consist of the contract, the general and special provisions, the drawings, proposal package (including best and final offer(s) if such is utilized), any addenda issued, and any change orders issued during the work.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

If applicable to the attached bid/proposal, bidder/proposer must sign three (3) original contracts and return with their bid/proposal submittal.

**Proposer should submit a proposed contract with its proposal or its sample material terms and conditions.**

The criteria utilized for determining responsibility of proposer(s) includes, but is not limited to, the proposer's experience, skill, ability, business judgment, financial capacity, integrity, honesty, possession of the necessary facilities or equipment, previous performance, reputation, promptness, and any other factor deemed relevant by the County. The proposers shall furnish any information requested by the County in order for the County to determine whether a proposer is responsible.

**20. CONTRACT TERM:**

The term of the resultant contract will begin on the date of execution by the Commissioners' Court and will terminate on the date specified in the resultant contract unless terminated earlier as herein set forth.

**21. TERMINATION FOR DEFAULT:**

Failure of either party in the performance of any of the provisions of this contract shall constitute a breach of contract, in which case either party may require corrective action within ten (10) days from date of receipt of written notice citing the exact nature of such breach. Failure of the party being notified to take corrective action within the prescribed ten (10) days, or failure to provide written reply of why no breach has occurred, shall constitute a Default of Contract.

All notices relating to default by Proposer of the provisions of the contract shall be issued by County by its Legal Department, and all replies shall be made in writing to the County Legal Department. Notices issued by or issued to anyone other than the County Legal Department shall be null and void and shall be considered as not having been issued or received.

Galveston County reserves the right to enforce the performance of this contract in any manner prescribed by law in the event of breach or default of this contract, and may contract with another party, with or without solicitation of bids or proposals or further negotiations. At a minimum, Proposer shall be required to pay any difference in service or materials, should it become necessary to contract with another source, plus reasonable administrative costs and attorney fees.

In the event of Termination for Default, Galveston County, its agents or representatives shall not be liable for loss of any profits anticipated to be made by Proposer.

In addition to the remedies stated herein, the County has the right to pursue other remedies permitted by law or in equity.

No waiver by either party of any event of default under this agreement shall operate as a waiver of any subsequent default under the terms of this agreement.

County reserves the right to terminate this contract immediately in the event Proposer:

- A. Fails to meet delivery or completion schedules; and/or
- B. Fails to otherwise perform in accordance with the accepted proposal and the contract.

**22. TERMINATION FOR CONVENIENCE:**

County may terminate this contract upon at least thirty (30) calendar days prior written notice for its convenience or for any reason deemed by the County to serve the public interest. County may terminate this contract upon thirty (30) calendar days prior written notice for any reason resulting from any governmental law, order, ordinance, regulations,

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

or court order. In no event shall County be liable for loss of any profits anticipated to be made hereunder by Proposer should this contract be terminated early.

**23. FORCE MAJEURE:**

If by reason of Force Majeure either Party shall be rendered unable, wholly or in part, to carry out its responsibilities under this contract by any occurrence by reason of Force Majeure, then the Party unable to carry out its responsibility shall give the other Party notice and full particulars of such Force Majeure in writing within a reasonable time after the occurrence of the event, and such notice shall suspend the Party's responsibility for the continuance of the Force Majeure claimed, but for no longer period.

Force Majeure means acts of God, floods, hurricanes, tropical storms, tornadoes, earthquakes, or other natural disasters, acts of a public enemy, acts of terrorism, sovereign conduct, riots, civil commotion, strikes or lockouts, and other causes that are not occasioned by either Party's conduct which by the exercise of due diligence the Party is unable to overcome and which substantially interferes with operations.

**24. ESTIMATED QUANTITIES:**

Any reference to quantities shown in the Request for Proposals is an estimate only. Since the exact quantities cannot be predetermined, the County reserves the right to adjust quantities as deemed necessary to meet its requirements.

**25. CONTRACTOR INVESTIGATION:**

Before submitting a proposal, each proposer shall make all investigations and examinations necessary to ascertain all site conditions and requirements affecting the full performance of the contract and to verify any representations made by the County upon which the contractor will rely. If the contractor receives an award as a result of its proposal submission, failure to have made such investigations and examinations will in no way relieve the contractor from its obligation to comply in every detail with all provisions and requirements of the contract, nor will a plea of ignorance of such conditions and requirements be accepted as a basis for any claim whatsoever by the contractor for additional compensation.

**26. NO COMMITMENT BY COUNTY OF GALVESTON:**

This Request for Proposal does not commit the County of Galveston to award any costs or pay any costs, or to award any contract, or to pay any costs associated with or incurred in the preparation of a proposal in response to this Request for Proposal, and does not commit the County of Galveston to procure or contract for services or supplies.

**27. PROPOSAL COSTS BORNE BY BIDDER/PROPOSER:**

Galveston County shall not be liable for any costs incurred by Bidder/Proposer in preparation, production, or submission of a bid/proposal and shall not be liable for any work performed by Bidder/Proposer prior to issuance of fully executed contract and properly issued notice to proceed. Galveston County shall not be liable for any costs incurred by Bidder/Proposer by reason of attending a pre-proposal conference. Galveston County shall not be liable for any costs incurred by Bidder/Proposer by reason of the County invoking use of best and final offers.

**28. BEST AND FINAL OFFERS (BAFO):**

In acceptance of proposals, the County of Galveston reserves the right to negotiate further with one or more of the proposers as to any features of their proposals and to accept modifications of the work and price when such action will be in the best interest of the County. This includes solicitation of a Best and Final Offer from one or more of the proposers. If invoked, this allows acceptable proposers the opportunity to amend, change or supplement their original proposal. Proposers may be contacted in writing requesting that they submit their Best and Final Offer. Any such Best and Final Offer must include discussed and negotiated changes.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**29. SINGLE PROPOSAL RESPONSE:**

If only one proposal is received in response to the Request for Proposal, a detailed cost proposal may be requested of the single contractor. A cost/price analysis and evaluation and/or audit may be performed of the cost proposal in order to determine if the price is fair and reasonable.

**30. CHANGES IN SPECIFICATIONS:**

If it becomes necessary to revise any part of this proposal, a written notice of such revision will be provided to all proposers in the form of addenda. The County is not bound by any oral representations, clarifications, or changes made in the written specifications by the County's employees, unless such clarification or change is provided to proposers in a written addendum from the Purchasing Agent.

The County of Galveston reserves the right to revise or amend the specifications up to the time set for opening of proposals. Such revisions and amendments, if any, shall be announced by amendments to the solicitation. Copies of such amendments shall be furnished to all prospective contractors. Prospective contractors are defined as those contractors listed on the County's Request for Proposal list for this material/service or those who have obtained documents subsequent to the advertisement. If revisions and amendments require changes in quantities or prices proposed, or both, the date set for opening of proposals may be postponed by such number of days as in the opinion of the County shall enable contractors to revise their proposals. In any case, the proposal opening shall be at least five working days after the last amendment, and the amendment shall include an announcement of the new date if applicable, for the opening or proposals.

**31. PROPOSAL IDEAS AND CONCEPTS:**

The County reserves to itself the right to adopt or use for its benefit, any concept, plan, or idea contained in any proposal.

**32. PROPOSAL DISCLOSURES:**

The names of those who submitted proposals will not be made public information unless in conformity with the County Purchasing Act. No pricing or staffing information will be released. Proposers are requested to withhold all inquiries regarding their proposal or other submissions until after an award is made. No communication is to be had with any County employee or official, other than the County Purchasing Agent, regarding whether a proposal was received. Violations of this provision may result in the rejection of a proposal.

**33. WITHDRAWAL OF PROPOSAL:**

Proposers may request withdrawal of a sealed proposal prior to the scheduled proposal opening time provided the request for withdrawal is submitted to the Purchasing Agent in writing. No proposals may be withdrawn for a period of sixty (60) calendar days after opening of the proposals.

**34. INDEMNIFICATION:**

**The contractor shall agree to assume all risks and responsibility for, and agrees to indemnify, defend, and save harmless, the County of Galveston, its elected and appointed officials and department heads, and its agents and employees from and against all claims, demands, suits, actions, recoveries, judgments, and costs and expenses including reasonable attorney's fees for the defense thereof in connection therewith on account of the loss of life, property or injury or damage to the person which shall arise from contractor's operations under this contract, its use of County facilities and/or equipment or from any other breach on the part of the contractor, its employees, agents or any person(s), in or about the County's facilities with the expressed or implied consent of the County. Contractor shall pay any judgment with cost which may be obtained against Galveston County resulting from contractor's operations under this contract.**

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**Contractor agrees to indemnify and hold the County harmless from all claims of subcontractors, laborers incurred in the performance of this contract. Contractor shall furnish satisfactory evidence that all obligations of this nature herein above designated have been paid, discharged or waived. If Contractor fails to do so, then the County reserves the right to pay unpaid bills of which County has written notice direct and withhold from Contractor's unpaid compensation a sum of money reasonably sufficient to liquidate any and all such lawful claims.**

**35. REQUIREMENT OF AND PROOF OF INSURANCE:**

The successful proposer shall furnish evidence of insurance to the County Purchasing Agent and shall maintain such insurance as required hereunder or as may be required in the Special Provisions or resultant contract, if different. Contractor shall obtain and thereafter continuously maintain in full force and effect, commercial general liability insurance, including but not limited to bodily injury, property damage, and contractual liability, with combined single limits as listed below or as may be required by State or Federal law, whichever is greater.

- A. For damages arising out of bodily injury to or death of one person in any one accident :  
ONE HUNDRED THOUSAND AND NO/100 (\$100,000.00) DOLLARS.
- B. For damages arising out of bodily injury to or death of two or more persons in any one accident:  
THREE HUNDRED THOUSAND AND NO/100 (\$300,000.00) DOLLARS.
- C. For any injury to or destruction of property in any one accident :  
ONE HUNDRED THOUSAND AND NO/100 (\$100,000.00) DOLLARS.

**Insurance shall be placed with insurers having an A.M. Best's rating of no less than A.** Such insurance must be issued by a casualty company authorized to do business in the State of Texas, and in standard form approved by the Board of Insurance Commissioners of the State of Texas, with coverage provisions insuring the public from loss or damage that may arise to any person or property by reason of services rendered by Contractor.

**Galveston County shall be listed as the additional insured on policy certificates and shall be provided with no less than thirty (30) calendar days prior notice of any changes to the policy during the contractual period.**

Certificates of Insurance, fully executed by a licensed representative of the insurance company written or countersigned by an authorized Texas state agency, shall be filed with the County Purchasing Agent within ten (10) business days of issuance of notification from the County Purchasing Agent to Proposer that the contract is being activated as written proof of such insurance and further provided that proposer shall not commence work under this contract until it has obtained all insurance required herein, provided written proof as required herein, and received written notice to proceed issued from the County Purchasing Agent.

Proof of renewal/replacement coverage shall be provided upon expiration, termination, or cancellation of any policy. Said insurance shall not be cancelled, permitted to expire, or changed without thirty (30) days prior written notice to the County.

Insurance required herein shall be maintained in full force and effect during the life of this contract and shall be issued on an occurrence basis. Contractor shall require that any and all subcontractors that are not protected under the Contractor's own insurance policies take and maintain insurance of the same nature and in the same amounts as required of Contractor and provide written proof of such insurance to Contractor. Proof of renewed/replacement coverage shall be provided upon expiration, termination, or cancellation of any policy. Contractor shall not allow any subcontractor to commence work on the subcontract until such insurance required for the subcontractor has been obtained and approved.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**Workers' Compensation Insurance:** Successful proposer shall carry in full force Workers' Compensation Insurance Policy(ies), if there is more than one employee, for all employees, including but not limited to full time, part time, and emergency employees employed by the successful proposer. Current insurance certificates certifying that such policies as specified above are in full force and effect shall be furnished by successful proposer to the County.

Insurance is to be placed with insurers having a Best rating of no less than A. The Proposer shall furnish the County with certificates of insurance and original endorsements affecting coverage required by these insurance clauses within ten (10) business days of receiving notification from the County Purchasing Agent that the contract is being activated. The certificates and endorsements for each insurance policy are to be signed by a person authorized by the insurer to bind coverage on its behalf. The Proposer shall be required to submit annual renewals for the term of this contract prior to expiration of any policy.

In addition to the remedies stated herein, the County has the right to pursue other remedies permitted by law or in equity.

The County agrees to provide Proposer with reasonable and timely notice of any claim, demand, or cause of action made or brought against the County arising out of or related to utilization of the property. Proposer shall have the right to defend any such claim, demand, or cause of action at its sole cost and expense and within its sole and exclusive discretion. The County agrees not to compromise or settle any claim or cause of action arising out of or related to the utilization of the property without the prior written consent of the Proposer.

In no event shall the County be liable for any damage to or destruction of any property belonging to the Proposer.

**36. PATENT AND COPYRIGHT PROTECTION:**

The Proposer agrees at its sole expense to protect the County from claims involving infringement of patents or copyrights. **Proposer shall indemnify and save harmless the County of Galveston, its officers, employees, and agents, from liability of any nature and kind whatsoever, including without limitation cost and expenses, for or on account of any copyrighted, patented or un-patented invention, process, or article manufactured or used in the performance of the contract, including its use by the County.** Proposer also agrees that if Proposer is awarded this contract, that no work performed hereunder shall be subject to patent, copyright, or other intellectual property by Proposer.

**37. CONFLICT OF INTEREST DISCLOSURE REPORTING:**

Proposer may be required under Chapter 176 of the Texas Local Government Code to complete and file a conflict of interest questionnaire (CIQ Form). If so, the completed CIQ Form must be filed with the County Clerk of Galveston County, Texas.

If Proposer has an employment or other business relationship with an officer of Galveston County or with a family member of an officer of Galveston County that results in the officer or family member of the officer receiving taxable income that exceeds \$2,500.00 during the preceding 12-month period, then Proposer **MUST** complete a CIQ Form and file the original of the CIQ Form with the County Clerk of Galveston County.

If Proposer has given an officer of Galveston County or a family member of an officer of Galveston County one or more gifts with an aggregate value of more than \$250.00 during the preceding 12-months, then Proposer **MUST** complete a CIQ Form and file the original of the CIQ Form with the County Clerk of Galveston County.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

The Galveston County Clerk has offices at the following locations:

**Galveston County Clerk**  
Galveston County Justice Center, Suite 2001  
600 59<sup>th</sup> Street  
Galveston, Texas 77551

**Galveston County Clerk**  
North County Annex, 1<sup>st</sup> Floor  
174 Calder Road  
League City, Texas 77573

Again, if Proposer is required to file a CIQ Form, the original completed form is filed with the Galveston County Clerk (not the Purchasing Agent).

For Proposer's convenience, a blank CIQ Form is enclosed with this proposal. Blank CIQ Forms may also be obtained by visiting the Galveston County Clerk's website and/or the Purchasing Agent's website – both of these websites are linked from the Galveston County homepage, at <http://www.co.galveston.tx.us>.

As well, blank CIQ Forms may be obtained by visiting the Texas Ethics Commission website, specifically at [http://www.ethics.state.tx.us/whatsnew/conflict\\_forms.htm](http://www.ethics.state.tx.us/whatsnew/conflict_forms.htm).

Chapter 176 specifies deadlines for the filing of CIQ Forms (both initial filings and updated filings).

It is Proposer's sole responsibility to file a true and complete CIQ Form with the Galveston County Clerk if Proposer is required to file by the requirements of Chapter 176 of the Local Government Code. Proposer is advised that it is an offense to fail to comply with the disclosure reporting requirements dictated under Chapter 176 of the Texas Local Government Code.

If you have questions about compliance with Chapter 176, please consult your own legal counsel. Compliance is the individual responsibility of each person, business, and agent who is subject to Chapter 176 of the Texas Local Government Code.

**38. COMPETITIVENESS AND INTEGRITY:**

To prevent biased evaluations and to preserve the competitiveness and integrity of such acquisition efforts, **proposers are to direct all communications regarding this proposal to the Galveston County Purchasing Agent**, unless otherwise specifically noted.

**Do not contact the requesting department.** Attempts by offering firms to circumvent this requirement will be viewed negatively and may result in rejection of the offer of the firm found to be in non-compliance.

**All questions regarding this Request for Proposal must be submitted in writing to:**

**Rufus Crowder, CPPO CPPB, Purchasing Agent**  
722 Moody, (21<sup>st</sup> Street)  
Fifth (5<sup>th</sup>) Floor, Purchasing  
Galveston, Texas 77550  
Fax: (409) 621-7997  
E-mail: [rufus.crowder@co.galveston.tx.us](mailto:rufus.crowder@co.galveston.tx.us)



**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

An authorized person from the submitting firm must sign all proposals. This signature acknowledges that the proposer has read the proposal documents thoroughly before submitting a proposal and will fulfill the obligations in accordance to the terms, conditions, and specifications.

Please carefully review this Request for Proposal. It provides specific information necessary to aid participating firms in formulating a thorough response.

**39. ENTIRETY OF AGREEMENT AND MODIFICATION:**

This contract contains the entire agreement between the parties. Any prior agreement, promise, negotiation or representation not expressly set forth in this contract has no force or effect. Any subsequent modification to this contract must be in writing, signed by both parties. An official representative, employee, or agent of the County does not have the authority to modify or amend this contract except pursuant to specific authority to do so granted by the Galveston County Commissioners' Court.

**40. NON-COLLUSION AFFIDAVIT:**

Proposer certifies, by signing and submitting a proposal, that the proposal is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the proposal is genuine and not collusive or sham; that the contractor has not directly or indirectly induced or solicited another contractor to put in a false or sham proposal, and has not directly or indirectly colluded, conspired, connived, or agreed with any contractor or anyone else to put in a sham proposal or that anyone shall refrain from bidding; that the contractor has not in any manner, directly or indirectly, sought by agreement, communications, or conference with anyone to fix the proposal price of the contractor of any other bidder, or to fix any overhead, profit or cost element of the proposal price, or that of any other contractor, or to secure any advantage against the public body awarding the contract or anyone interested in the proposed contract; that all statements contained in the proposal are true; and further, that the contractor has not, directly or indirectly, submitted his or her proposal price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any cooperation, partnership, company association, organization, proposal depository, or to any member or agent thereof to effectuate a collusive or sham proposal.

**A blank Non-Collusion Affidavit is included with this proposal packet. Proposer must enclose a truthful and fully executed original Non-Collusion Affidavit with the submission of its proposal. This is a mandatory requirement of this RFP. Failure to include the truthfully and fully executed Non-Collusion Affidavit in the submission of its proposal shall be considered non-compliance with the requirements of this RFP by the Proposer and grounds for the rejection of Proposer's submission.**

No negotiations, decisions, or actions shall be initiated by any company as a result of any verbal discussion with any County employee prior to the opening of responses to this Request for Proposal.

No officer or employee of the County of Galveston, and no other public or elected official, or employee, who may exercise any function or responsibilities in the review or approval of this undertaking shall have any personal or financial interest, direct or indirect, in any contract or negotiation process thereof. The above compliance request will be part of all County of Galveston contracts for this service.

**41. SOVEREIGN IMMUNITY:**

The County specifically reserves any claim it may have to sovereign, qualified, or official immunity as a defense to any action arising in conjunction with this contract.

**42. CONTROLLING LAW AND VENUE:**

Proposer acknowledges and agrees that the contract is and shall be governed and construed by the laws of the State of Texas and that venue shall lie exclusively in Galveston County, Texas.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**43. MERGERS, ACQUISITIONS:**

The Proposer shall be required to notify the County of any potential for merger or acquisition of which there is knowledge at the time that a proposal is submitted.

If subsequent to the award of any contract resulting from this RFP the Proposer shall merge or be acquired by another firm, the following documents must be submitted to the County:

- A. Corporate resolutions prepared by the awarded Proposer and the new entity ratifying acceptance of the original contract, terms, conditions and prices;
- B. New Proposer's Federal Identification Number (FEIN) and;
- C. New Proposer's proposed operating plans.

Moreover, Proposer is required to provide the County with notice of any anticipated merger or acquisition as soon as Proposer has actual knowledge of the anticipated merger or acquisition. The New Proposer's proposed plan of operation must be submitted prior to merger to allow time for submission of such plan to the Commissioners' Court for its approval.

**44. DELAYS:**

The County reserves the right to delay the scheduled commencement date of the contract if it is to the advantage of the County. There shall be no additional costs attributed to these delays should any occur. Proposer agrees it will make no claims for damages, for damages for lost revenues, for damages caused by breach of contract with third parties, or any other claim by Proposer attributed to these delays, should any occur. In addition, Proposer agrees that any contract it enters into with any third party in anticipation of the commencement of the contract will contain a statement that the third party will similarly make no claim for damages based on delay of the scheduled commencement date of the contract.

**45. ACCURACY OF DATA:**

Information and data provided through this Request for Proposal are believed to be reasonably accurate.

**46. SUBCONTRACTING/ASSIGNMENT:**

Proposer shall not assign, sell, or otherwise transfer its contract in whole or in part without prior written permission of Commissioners' Court. Such consent, if granted, shall not relieve the Proposer of any of its responsibilities under this contract.

**47. INDEPENDENT CONTRACTOR:**

Proposer expressly acknowledges that it is an independent contractor. Nothing in this agreement is intended nor shall be construed to create an agency relationship, an employer/employee relationship, a joint venture relationship, or any other relationship allowing County to exercise control or direction over the manner or method by which Proposer or its subcontractors perform in providing the requirements stated in the Request for Proposal.

**48. MONITORING PERFORMANCE:**

The County shall have the unfettered right to monitor and audit the Proposer's work in every respect. In this regard, the Proposer shall provide its full cooperation and insure the cooperation of its employees, agents, assigns, and subcontractors. Further, the Proposer shall make available for inspection and/or copying when requested, original data, records, and accounts relating to the Proposer's work and performance under this contract. In the event any such material is not held by the Proposer in its original form, a true copy shall be provided.

**49. PROCUREMENT ETHICS:**

Galveston County is committed to the highest ethical standards. Therefore, it is a serious breach of the public trust to subvert the public purchasing process by directing purchases to certain favored vendors, or to tamper with the competitive bidding process, whether it's done for kickbacks, friendship or any other reason. Since misuse of the

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

purchasing power of a local government carries criminal penalties, and many such misuses are from a lack of clear guidelines about what constitutes an abuse of office, the Code of Ethics outlined below must be strictly followed.

Galveston County also requires ethical conduct from those who do business with the County.

**CODE OF ETHICS – Statement of Purchasing Policy:**

“Public employment is a public trust. It is the policy of Galveston County to promote and balance the objective of protecting the County’s integrity and the objective of facilitating the recruitment and retention of personnel needed by Galveston County. Such policy is implemented by prescribing essential standards of ethical conduct without creating unnecessary obstacles to entering public office.

Public employees must discharge their duties impartially so as to assure fair competitive access to governmental procurement by responsible contractors. Moreover, they should conduct themselves in such a manner as to foster public confidence in the integrity of the Galveston County procurement organization.

To achieve the purpose of this Article, it is essential that those doing business with Galveston County also observe the ethical standards prescribed here.”

**General Ethical Standards:**

It shall be a breach of ethics to attempt to realize personal gain through public employment with Galveston County by any conduct inconsistent with the proper discharge of the employee’s duties.

It shall be a breach of ethics to attempt to influence any public employee of Galveston County to breach the standards of ethical conduct set forth in this code.

It shall be a breach of ethics for any employee of Galveston County to participate directly or indirectly in a procurement when the employee knows that:

The employee or any member of the employee’s immediate family, has a financial interest pertaining to the procurement;

A business or organization in which the employee or any member of the employee’s immediate family, has a financial interest pertaining to the procurement; or

Any other person, business, or organization with which the employee or any member of the employee’s immediate family is negotiating or has an arrangement concerning prospective employment is involved in the procurement.

**Gratuities:**

It shall be a breach of ethics for any person to offer, give, or agree to give any employee or former employee of Galveston County, or for any employee or former employee of Galveston County to solicit, demand, accept or agree to accept from another person, a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation of any part of a program requirement or a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing, or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim or controversy, or other particular matter, pertaining to any program requirement or a contract or subcontract, or to any solicitation or proposal therefor.

**Kickbacks:**

It shall be a breach of ethics for any payment, gratuity or offer of employment to be made by or on behalf of a subcontractor under a contract to the prime contractor or higher tier subcontractor or to any person associated therewith as an inducement for the award of a subcontract or order.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**Contract Clause:**

The prohibition against gratuities and kickbacks prescribed above shall be conspicuously set forth in every contract and solicitation by Galveston County.

**Confidential Information:**

It shall be a breach of ethics for any employee or former employee of Galveston County to knowingly use confidential information for actual or anticipated personal gain, or for the actual or anticipated gain of any other person.

**Prohibition against Contingent Fees:**

It shall be a breach of ethical standards for a person to be retained, or to retain a person, to solicit or secure a Galveston County contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except for retention of bona fide employees or bona fide established commercial selling agencies for the purpose of securing business. Failure to abide by this section constitutes a breach of ethical standards.

**Representation:**

Proposer represents and warrants, by signing and submitting its proposal, that it has not retained anyone in violation of this section prohibiting contingent fees.

**Contract Clause:**

The representation prescribed above shall be conspicuously set forth in every contract and solicitation thereof.

**50. SUBJECT TO APPROPRIATION OF FUNDS:**

State law prohibits the obligation and expenditure of public funds beyond the fiscal year for which a budget has been approved by the Commissioners' Court. Galveston County anticipates this to be an integral part of future budgets to be approved during the periods of this contract, except for unanticipated needs or events which may prevent such payments against this contract. However, Galveston County cannot guarantee the availability of funds, and enters into this contract only to the extent such funds are made available through appropriation (allocation) by the Commissioners' Court. This contract shall not be construed as creating any debt on behalf of the County of Galveston in violation of TEX. CONST. art. XI, § 7, and it is understood that all obligations of Galveston County are subject to the availability of funds.

**51. NOTICE:**

All notices or other communications required or permitted under this contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, transmitted by facsimile, or mailed certified mail, return receipt requested with proper postage affixed and addressed to the appropriate party at the following address or at such other address as may have been previously given in writing to the parties (Proposer shall provide its notice information with its proposal submission). If mailed, the notice shall be deemed delivered when actually received, or if earlier, on the third day following deposit in a United States Postal Service post office or receptacle, duly certified, return receipt requested, with proper postage affixed. If delivered in person, notice shall be deemed delivered when receipted for by, or actually received by, the receiving Party.

If transmitted by facsimile, notice shall be deemed delivered when receipt of such transmission is acknowledged.

**To the County at:**

Hon. Mark Henry,  
County Judge of Galveston County  
722 Moody (21<sup>st</sup> Street), Second (2<sup>nd</sup>) Floor  
Galveston, Texas 77550  
Fax: (409) 765-2653

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

**With copies to:**

Rufus Crowder, CPPO CPPB,  
Galveston County Purchasing Agent  
722 Moody (21<sup>st</sup> Street), Fifth (5<sup>th</sup>) Floor  
Galveston, Texas 77550  
Fax: (409) 621-7997

Robert Boemer, Director,  
Galveston County Legal Department  
722 Moody (21<sup>st</sup> Street), Fifth (5<sup>th</sup>) Floor  
Galveston, Texas 77550  
Fax: (409) 770-5560

**To the Contractor at:**

(Proposer to provide its contact name, address, and facsimile number for notice hereunder.)

**52. NON-DISCRIMINATION:**

- A. **Equal Employment Opportunity:** Proposer will not discriminate against any employee or applicant for employment because of race, color, religion, national origin, sex, disability, genetic information or veteran status. Proposer will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, national origin, sex, disability, genetic information or veteran status. Such action shall include, but not be limited to, the following: employment; upgrading; demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Proposer agrees to post in conspicuous places, available to employees and applicants for employment, notices of employment.

Proposer will, in all solicitation or advertisements for employees placed by or on behalf of Proposer, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, national origin, sex, disability, genetic information, or veteran status.

Proposer will cause the foregoing provisions to be inserted in all subcontracts for any work covered by this Agreement so that such provisions will be binding upon each subcontractor, provided that the foregoing provisions shall not apply to contracts or subcontracts for standard commercial supplies or raw materials.

Proposer will include the provisions herein in every subcontract or purchase order unless exempted.

- B. **Drug Free Work Place Act:** Proposer shall comply with all applicable requirements of the Drug-Free Workplace Act of 1988 and implementing regulations.
- C. **Americans with Disabilities Act:** Proposer shall comply with all applicable provisions of the Americans with Disabilities Act and implementing regulations.
- D. **OSHA Regulations:** Proposer agrees to maintain and to display any applicable materials for its employees in accordance with OSHA regulations.
- E. **Compliance with Immigration Laws and Use of E-Verify:** Proposer agrees to comply with all requirements of the U.S. Immigration Reform and Control Act of 1986, as amended, and any implementing regulations thereto. Proposer further agrees to utilize the E-Verify system through the Department of Homeland Security on its employees. Proposer shall not employ unauthorized aliens, and shall not assign services to be performed to any supplier or subcontractor who are unauthorized aliens. If any personnel performing any services hereunder are discovered to be an unauthorized alien, then Proposer will immediately remove such personnel from performing services hereunder and shall replace such personnel with personnel who are not unauthorized alien(s).

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

- F. **State and Federal Law Compliance:** Proposer agrees to comply with all other State and Federal laws and regulations applicable to the provision of services under this contract.

**53. RECORD RETENTION AND RIGHT TO AUDIT:**

Proposer shall keep and maintain all records associated with this contract for a minimum of five (5) years from the close of the contract or as required by Federal or State law or regulation, whichever period is longer. If awarded this contract, Proposer shall allow the County reasonable access to the records in Proposer's possession, custody, or control that the County deems necessary to assist it in auditing the services, costs, and payments provided hereunder. If this contract involves the use of Federal or State

funds, then Proposer shall also allow reasonable access to representatives of the Office of Inspector General, the General Accounting Office, and the other Federal and/or State agencies overseeing the funds that such entities deem necessary to facilitate review by such agencies and Proposer shall maintain fiscal records and supporting documentation for all expenditures in a manner that conforms with OMB Circular A-87 (relocated to 2 C.F.R. Part 225) and this contract.

**54. TITLE VI ASSURANCES/TxDOT:**

The County is subject to Title VI of the Civil Rights Act of 1964 and the Federal and State laws and regulations of the United States Department of Transportation and Texas Department of Transportation (TxDOT). Pursuant to these requirements, the County must have its contractors provide required assurances on compliance with non-discrimination by itself and its subcontractors. The Title VI Assurances within this Subsection are not exhaustive – whenever any Federal, State, or Local requirement requires additional clauses, this list shall not be construed as limiting. Contractor agrees as follows:

- A. **Compliance with Regulations:** The Contractor shall comply with the Regulations relative to nondiscrimination in Federally-assisted programs of the Department of Transportation (hereinafter, DOT) Title 49, Code of Federal Regulations, Part 21, as they may be amended from time to time (hereinafter referred to as the Regulations), which are incorporated herein by reference and made a part of this contract.
- B. **Non-discrimination:** The Contractor, with regard to the work performed by it during the contract, shall not discriminate on the basis of race, color, national origin, religion, sex, age, disability or Veteran status in the selection and retention of subcontractors, including procurements of materials and leases of equipment. The Contractor shall not participate either directly or indirectly in the discrimination prohibited by Section 21.5 of the Regulations, including employment practices when the contract covers a program set forth in Appendix B of the Regulations.
- C. **Solicitations for Subcontractors, Including Procurement of Materials and Equipment:** In all solicitations either by competitive bidding or negotiation made by the Contractor for work to be performed under a subcontract, including procurement of materials or leases of equipment, each potential subcontractor or supplier shall be notified by the Contractor of the Contractor's obligations under this contract and the Regulations relative to nondiscrimination on the grounds of race, color, national origin, religion, sex, age, disability or Veteran status.
- D. **Information and Reports:** The Contractor shall provide all information and reports required by the Regulations or directives issued pursuant thereto, and shall permit access to its books, records, accounts, other sources of information and its facilities as may be determined by the Galveston County or the Texas Department of Transportation to be pertinent to ascertain compliance with such Regulations, orders and instructions. Where any information required of the Contractor is in the exclusive possession of another who fails or refuses to furnish this information the Contractor shall so certify to Galveston County or the Texas Department of Transportation as appropriate, and shall set forth what efforts it has made to obtain the information.

**GENERAL PROVISIONS  
PROPERTY & CASUALTY INSURANCE  
GALVESTON COUNTY, TEXAS**

E. **Sanctions for Noncompliance:** In the event of the Contractor's noncompliance with the nondiscrimination provisions of this contract, Galveston County shall impose such contract sanctions as it or the Texas Department of Transportation may determine to be appropriate, including, but not limited to:

- 1) withholding of payments to the Contractor under the contract until the Contractor complies, and/or;
- 2) cancellation, termination, or suspension of the contract, in whole or in part.

F **Incorporation of Provisions.** The Contractor shall include the provisions of paragraphs (1) through (6) in every subcontract, including procurement of materials and leases of equipment, unless exempt by the Regulations, or directives issued pursuant thereto. The Contractor shall take such action with respect to any subcontract or procurement as Galveston County or the Texas Department of Transportation may direct as a means of enforcing such provisions including sanctions for non-compliance: Provided, however, that, in the event Contractor becomes involved in, or is threatened with, litigation with a subcontractor or supplier as a result of such direction, the Contractor may request Galveston County to enter into such litigation to protect the interests of Galveston County, and, in addition, the Contractor may request the United States to enter into such litigation to protect the interests of the United States.

**55. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, PROPOSED DEBARMENT, AND OTHER RESPONSIBILITY MATTERS:**

Proposer certifies that neither it, nor any of its Principals, are presently debarred, suspended, proposed for debarment, disqualified, excluded, or in any way declared ineligible for the award of contracts by any Federal agency. Contractor agrees that it shall refund Galveston County for any payments made to Contractor while ineligible. Contractor acknowledges that Contractor's uncured failure to perform under this Agreement, if such should occur, may result in Contractor being debarred from performing additional work for the County, the GLO, the State, HUD, and other Federal and State entities. Further, Proposer has executed the Certification Regarding Debarment, Suspension, Proposed Debarment, and Other Responsibility Matters and returned the fully completed and executed original certification with the submission of its proposal. **The truthful and fully completed and executed original of the Certification Regarding Debarment, Suspension, Proposed Debarment, and Other Responsibility Matters must be included with the submission of Proposer's proposal and is a mandatory requirement of this RFP. Proposer's failure to include the fully completed and executed original of this Certification shall be considered non-compliance with the requirements of this RFP and grounds for the rejection of Proposer's proposal.**

**56. SECTION 231.006, FAMILY CODE/DELINQUENT CHILD SUPPORT:**

Pursuant to Title 5, Section 231.006 of the Texas Family Code, as applicable, Proposer certifies that it, including all of its principals, is/are current in child support payments and therefore, that it is eligible to receive payments from State funds under a contract for property, materials, or services. Proposer acknowledges and agrees that if it is awarded this contract, then the ensuing agreement may be terminated and payment withheld if this certification is inaccurate. Finally, by the submission of its proposal, the Proposer certifies that it has included the names and social security numbers of each person with at least 25% ownership interest in Proposer within its response to the RFP and that all such persons are current in child support payments.

**57. LABOR STANDARDS:**

Proposer acknowledges that the contract to be awarded pursuant to this RFP is on a grant program funded with Federal funds. Proposer shall comply with the requirements of 29 CFR Part 5 and CFR Part 30 and shall be in conformity with Executive Order 11246, entitled "Equal Employment Opportunity", Copeland, "Anti-Kickback" Act (29 C.F.R. Part 3), the Davis-Bacon and Related Acts (29 C.F.R. Parts 1,3, and 5), the Contract Work Hours and Safety Standards Act (40 U.S.C. 3701 et seq.), and all other applicable Federal, State, and local laws and regulations pertaining to labor standards, insofar as those acts apply to the performance of this Agreement. Proposer is also responsible for ensuring that all subcontractors comply with the requirements of 29 CFR Part 5 and CFR Part 30 and shall be in conformity with Executive Order 11246, entitled "Equal Employment Opportunity", Copeland "Anti-Kickback" Act, the Davis-Bacon and Related Acts (29 CFR Parts 1, 3 and 5), the Contract Work Hours and Safety Standards Act (40 U.S.C. 3701 et seq.), and all other applicable Federal, State, and local laws and regulations pertaining to labor standards, insofar as those acts apply to the performance of this Agreement.

## SECTION I

### GENERAL REQUIREMENTS AND INSTRUCTIONS

**Special Note: The Special Provision section of this Request for Proposal solicitation and the exhibits attached herein are made a part of the entire agreement between the parties with respect to the subject matter of the Request for Proposal and Resultant Contract Agreement, and supersede the General Provisions, any prior negotiations, agreements and understandings with respect thereto.**

#### **A. Information:**

1. The information contained in these specifications is confidential and is to be used only in connection with the preparation of proposals for insurance coverage.
2. Each proposer is asked to submit quotations on the basis of the specifications contained herein. Alternative proposals will also be considered, however if alternates are to be submitted, they must be in detail and the end result should equal or exceed the desired result set forth in the specifications.
3. A proposer will be defined as one agent or agency without pooling of resources with other agents. Should agents pool resources, they will be considered one bidder. Agents may not bid as independents and as members of pools simultaneously.
4. The information contained herein is believed to be accurate and up to date to the best of our knowledge.

#### **B. LEGAL:**

Proposers are expected to comply with all Federal, State, and local insurance laws and regulations relative to the preparation and submission of insurance proposals. Unless otherwise noted, all submissions will be deemed in compliance with all applicable laws.

#### **C. CORRESPONDENCE AND CONTACTS:**

1. All proposals shall be delivered to the County Purchasing Agent for the County of Galveston.
2. Requests for information, written, verbal or otherwise shall be directed to:

Galveston County Purchasing Agent  
722 Moody – 5<sup>th</sup> Floor  
Galveston, Texas 77550  
409-770-5372  
[Rufus.Crowder@co.galveston.tx.us](mailto:Rufus.Crowder@co.galveston.tx.us)

Any tours or inspections should be arranged with the above.



**D. IMPORTANT DATES:**

1. Renewal for the current policy is November 1, 2014. Any agent that is successful in receiving the proposal award should have all necessary arrangements made to bind coverage on the above date without delay.
2. Binders from the successful proposer should be delivered to the Purchasing Agent no later than 5 working days from the date of award by Galveston County Commissioners Court or 2 days prior to coverage attachment, whichever is sooner.
3. Policies must be delivered no later than 60 days from attachment of coverage.

**E. AGENTS UNDERWRITING DUTIES:**

1. All proposals should be clearly explained and identified. Any costs, including optional programs, must be clearly stated and itemized on the bid sheet. Again any deviation from the RFP must be explicitly identified and be as complete and comprehensible as possible. All forms must be completed by each bidder for the bid to be viewed as responsive.
2. It is the bidding agent's responsibility to screen the carrier's coverage proposals for accuracy and compliance with the specifications set forward. The County will not accept any deviation from the submitted bid unless agreed upon by the Commissioners Court as concurred by the County Legal Department and County Purchasing Agent.
3. No proposal may be withdrawn after the closing time for bids set by the County Purchasing Agent.

**F. QUALIFICATIONS:**

1. Agent: All insurance agents or brokers bidding on this proposal shall be duly licensed as such to do business in the state of Texas. At the request of Commissioners' Court or the Risk Analyst, all agents should be able to furnish evidence of Insurance Agents Errors and Omissions coverage in an amount not to be less than \$1,000,000 each occurrence/\$2,000,000 aggregate. The County also requests that three (3) references be submitted by each agent complete with contact name, mailing address and phone numbers. A comparable size to Galveston County in terms of both number of property and dollar amounts. If none, list your three (3) largest commercial accounts.
2. Insurer:
  - a. All carriers submitted for coverage should possess a *BEST* rating of A or greater. Other comparable rating guides may be used for carrier rating; however each carrier bid must be rated by *BEST*.
  - b. In order to qualify for coverage for the County of Galveston, any and all carriers must be licensed, admitted carriers, or legally established insurance company or self-insurance or governmental pools or programs.

- c. Local claims, underwriting and engineering capabilities will be a plus. If independent servicing firms are to be used for claims or safety engineering services, their names and addresses should be submitted along with your bid.
- d. Proposals will be accepted from intergovernmental risk sharing pools. Self-insurance pools must include a current financial statement (Balance Sheet and Statement of operations) and the most recent audited financial statements, including the auditor's opinion, plus complete particulars about its reinsurance programs.

**G. ADDITIONAL SERVICES:**

The County of Galveston will weigh heavily the available services from the proposing agents. The County of Galveston encourages any literature or marketing material outlining such services be submitted along with the proposal.

**H. CONTRACTUAL DURATION:**

The County of Galveston is seeking a proposal for one (1) year with up to three (3), one (1) year renewal options to be determined at the discretion of Commissioners Court in consultation with the Purchasing Agent and Risk Analyst.

**I. DISQUALIFICATION OF BIDDERS/BIDS:**

Failure to comply with the requirements or the procedures set forth in these specifications and information packet or non-satisfaction of the insurance and servicing criteria set forth herein may result in disqualification of the proposer or the complete rejection of the proposal.

**J. SELECTION CRITERIA:**

It is the intent of the County of Galveston and Commissioners Court to award windstorm, flood and property insurance to a single vendor, however, the County of Galveston and Commissioners Court reserves the right to award the subjects of the proposal, in whole or in part, to those bidders who demonstrate professional competence in submitting proposals that satisfy cost, coverage, and servicing criteria. Insurance proposals will be carefully evaluated in terms of cost effectiveness and coverage, and for compliance with the insurance, risk financing and servicing criteria as contained in the specifications. The County will consider the merits of each proposal and arrive at a decision. Award will be made to the proposer submitting the lowest and/or best proposal. The final cost determination will be made on the lump sum cost of the coverage for one policy year. However, we also request that all portions of the itemized proposal sheet be filled out when possible. The County of Galveston and Commissioners Court reserves the right to reject any portion and/or any or all proposals submitted.

Following is a list of criteria, in descending order of importance that the County of Galveston will use to determine the lowest and best bid proposal:

1. The Lump Sum Cost of one year of coverage meeting or exceeding all specifications set forth in the specifications.

2. Carrier Selection
3. Ability to provide all specified coverage's as set forth in these specifications.
4. Service Criteria as outlines in section "K" of this RFP.
5. Agency References
6. Range & Availability of Varying Deductibles
7. Proposed Layering

**K. SERVICING CRITERIA:**

The County of Galveston desires to receive personalized and timely service from any insuring agent and/or carrier. All services should be of the highest professional quality. The following criteria will be used in judging service criteria:

1. Number of years agency in Business
2. Size of Agency and Staff
3. Experience and Education of Staff
4. Professional Servicing Capability (i.e. claims, etc.)
5. Capability and willingness of the agency to personally respond to the professional needs of the County of Galveston in a timely manner.
6. Other Technical skill and services offered by the agency.
7. References.
8. After hours contact ability.
9. Assigned/dedicated staff to the account.
10. Nearest office location to 722 Moody, Galveston, Texas 77550.

**L. AUTHORIZED SIGNATURE:**

All proposal forms must be signed by persons who have the legal authority to bind the insurer to the insurances that are proposed.

**SECTION II**

**MINIMUM UNDERWRITING REQUIREMENTS**

1. The named insureds for all coverages shall be:

County of Galveston  
&  
Galveston County Commissioners Court

**2. CANCELLATION & RENEWAL:**

- a. A minimum cancellation provision of sixty (60) days is required in all proposed policies in lieu of any other customary provisions for cancellation.

**3. GENERAL PROVISIONS**

- a. The notice of claims provisions in the policy should state that knowledge of the actual or potential claim by the County of Galveston commences upon receipt of such information or advice by the Risk Manager of the County of Galveston.
- b. Any policy proposed for Galveston County should be endorsed to the effect that failure to disclose all facts at the inception date of the coverage shall not prejudice the insurance or the County, providing that such failure is due to unintentional error or omission.
- c. Binders should be delivered and in the possession of the Purchasing Agent no later than five working days from the date of award by Commissioners Court or two (2) days prior to the attachment of coverage, whichever is practical and/or sooner.
- d. Automatic full coverage for any newly acquired or formed properties should begin at receipt or possession of the property and include coverage for a minimum of ninety (90) days or until such time as appropriate notice is given to the agent and carrier for all coverage's in force.
- e. As stated in section one, the County of Galveston desires one (1) year contractual insurance agreement, however Commissioners Court in consultation with the Insurance Analyst and the County Purchasing Agent may elect to renew the policy for three (3) additional one (1) year periods should it be so desired. Note these renewals are at the discretion of Commissioners' Court and in no way reflect a contractual agreement for any period longer than one (1) year in the first term or one (1) year after that.

**4. PAYMENT SCHEDULE**

The County of Galveston customarily pays full premium at policy inception, however the County wishes to have the option of and will give favorable reception to, any agent that can, as an option, provide monthly or quarterly installments for payment of premium if so desired by the County. Proposals should detail any fees associated with such an option.

**5. PACKAGING & CONSOLIDATION**

The County of Galveston is not adverse to package coverage and would be receptive to adjoining existing or other newly incepting policies providing that the end coverage equals or exceeds the protection and indemnity sought in this RFP and does not in any way lessen any other coverage that the County currently has with any agent or carrier.

**6. LAYERING OF COVERAGE**

Should any agent or carrier choose to layer any line of Insurance that protects and indemnifies the County of Galveston, the County and Commissioners Court request that all subsequent signers of the slip be disclosed in the proposal. It should also be understood that any other coverage should follow all terms and conditions of the underlying coverage and any premium costs should be reflected in the lump sum annual payment.

**The remainder of this page intentionally left blank**

**SECTION III**

**SUBSECTION A**

**DESIRED COVERAGES**

**I. COVERAGES:**

The County of Galveston desires the following coverage for its' Physical property locations that are under bid in this RFP:

- A. Special all-risk AOP form. Quotes should include coverage for the perils and may exclude perils as set forth in Subsection C.
- B. If unable to include wind, hail, flood, and/or any other requested peril in AOP, quote separately through TWIA, NFIP, etc. as appropriate using the full insurable amounts available up to the values provided in Schedule A. Quote occurrence deductibles of maximum % up to 5% per occurrence for TWIA. For regular AOP quote occurrence deductibles of \$50,000 per occurrence.

- C. The County of Galveston will look favorably on having windstorm and/or hail coverage written into the main AOP policy, whenever possible, rather than through TWIA. Similarly, the County of Galveston will look favorably on placement of hail coverage through the AOP policy with only wind coverage through TWIA, if this arrangement achieves the best combination of coverage for the requested perils and properties. Bids may include multiple coverage options with regard to wind and hail: i.e., a coverage option with wind and hail covered through TWIA; a separate option with wind and hail covered as part of the AOP policy, if possible; and a third option with hail covered through the AOP policy and only wind covered through TWIA.

- D. Flood - \$5,000 Deductible

Quote flood insurance on all locations including contents for the full insurable values or the maximum amounts available through NFIP. Any deviations from above minimum requirements shall be explained on the Bid Sheet Proposal attached to this packet.

In addition to the physical property coverages requested the County of Galveston request that bidder indicate an:

- E. Employment Practice Liability, Crime Shield policies, and other bonds as requested by the county throughout the bid period.
- F. The ability to provide the appropriate insurance for and service to qualified CDBG program recipients.

**SECTION III**

**SUBSECTION B**

**APPLICABLE DEFINITIONS**

**I. DEFINITIONS:**

Buildings shall be deemed to include:

1. The Building (Including Structure)(Please see Section VII, Schedule "A", for list of buildings)
2. Completed Additions
3. Permanently installed:
  - (a) Fixtures
  - (b) Machinery
  - (c) Equipment
4. Outdoor Fixtures
5. Personal property owned by the county that is used to maintain or service the building or structure or its premises including:
  - (a) Fire Extinguishing Equipment
  - (b) Outdoor Furniture
  - (c) Floor Coverings
  - (d) Appliances used for refrigerating, ventilating cooking, dishwashing or laundering.
6. Additions under construction, alterations and repairs to the building or structure.
7. Materials, equipment, supplies and temporary structures, on or within the 100 feet of the described premises, used for making additions, alterations or repairs to the building or structure.
8. Pavement, foundations etc.,
9. Underground plumbing, electrical and phone equipment

Contents (Personal Property) shall include:

1. Furniture and Fixtures (Unattached)
2. Machinery and Equipment(Please see Section VII, Schedule D and Schedule F, for lists of machinery and equipment)
3. "Stock"
4. All other property owned by the County and used in the business.
5. Labor, materials or services furnished or arranged by the county on personal property of others
6. Use interest as tenant in improvements and betterments. Improvements and betterments are fixtures, alterations, installations or additions:
  - (a) Made a part of the building or structure we occupy but do not own; and
  - (b) We acquired or made at our expense but cannot legally remove.

7. Leased personal property for which we have contractual responsibility to insure, unless otherwise provided for under Personal Property of others.
8. Personal Property of others that is:
  - (a) In our care, custody and control; and
  - (b) Located in or on the building or structure described in the declarations or in the open (or in a vehicle) within 100 feet of the described premises.

**The remainder of this page intentionally left blank**



**SECTION III**

**SUBSECTION C**

**NAMED PERILS - CAUSES OF LOSS**

The following are the minimum named perils desired, with additional coverage acceptable.

I. Perils - Causes of Loss

1. Fire
2. Lightning
3. Explosion
4. Windstorm
5. Hail
6. Smoke
7. Aircraft or Vehicle
8. Riot or Civil Commotion
9. Vandalism
10. Malicious Mischief
11. Sprinkler leakage
12. Water Damage Caused by Bursting or Leaking Pipes
13. Water Damage Resulting from Plumbing Malfunctions
14. Sinkhole Collapse
15. Volcanic Action
16. Earthquake
17. ISO Special Causes of Loss

II. Exclusions **May** Include:

1. Terrorism Coverage
2. Mold Coverage

**The remainder of this page intentionally left blank**

**SECTION III**

**SUBSECTION D**

**NAMED LOCATIONS AND LIMITS**

Following, in Section VII Schedule "A", is a listing of properties with the addresses listed as they have been assigned by the state insurance board. Also included is the value given to that property. This value represents to total value of this particular location, and does not take into account any co-insurance clauses.

Replacement costs shall apply to all properties and contents.

Bids shall include premium costs for coverage at the following co-insurance levels:

(c) 80% or greater

The County of Galveston will look favorably on having windstorm coverage written into the main policy whenever possible rather than TWIA.

The County of Galveston will look favorably on any bid submission that contains all coverage limits in one policy without having to have excess policies written.

**The remainder of this page intentionally left blank**

**SECTION III**

**SUBSECTION E**

**PROPERTY & WIND DEDUCTIBLES**

**I. DEDUCTIBLES:**

1. The County asks that bidders submit proposals including premium costs for all desired coverage (for the property)(with the exception of lesser deductibles listed in item 2.) at the following deductible levels:

Maximum up to 5% per location for windstorm

Maximum up to 5% per location for AOP that includes wind and hail OR maximum \$50,000 if wind excluded.

2. Flood Deductible:                   \$5,000

**The remainder of this page intentionally left blank**

**SECTION IV**

**LIST OF ALL ATTACHED SCHEDULES**

<b><u>SCHEDULE</u></b>	<b><u>DESCRIPTION</u></b>
SCHEDULE "A" SCHEDULE "B"	PROPERTY LIST WITH LOCATIONS AND LIMITS FIVE YEAR LOSS RUN FOR PROPERTY

**Please see Attachment A  
for  
Schedules A – Schedule B**

**The remainder of this page intentionally left blank**

**SECTION V**  
**PROPOSAL SHEET FOR PROPERTY INSURANCE**  
**COUNTY OF GALVESTON**

This proposal is submitted to provide the County of Galveston with insurance coverage for its owned and/or operated properties. Coverage shall begin at 12:00 a.m. on November 1, 2014, and expire on the same date in 2015. Deductibles, limits and other coverage specifics must be per specifications included with this sheet.

---

BID I: Deductible Level = \$50,000

Property Coverage Carrier: \_\_\_\_\_

Windstorm Carrier: \_\_\_\_\_  
(if different from Fire Policy)

Property Carrier Best Rating: \_\_\_\_\_

Fire, Vandalism and Malicious  
Mischief Premium: \_\_\_\_\_

Windstorm Premium:  
(if carrier differs from  
fire policy) \_\_\_\_\_

Total Lump Sum Premium for 1 Year  
Year of Coverage as per specification  
without exception unless otherwise  
noted on this sheet: \_\_\_\_\_

---

Deviations, Comments or Explanations:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Agency Submitting this Proposal: \_\_\_\_\_

Account Manager/CSR Handling This Account: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Phone: \_\_\_\_\_

Signature of Agent Submitting This Proposal: \_\_\_\_\_

**PROPOSAL SHEET FOR PROPERTY INSURANCE  
COUNTY OF GALVESTON**

This proposal is submitted to provide the County of Galveston with insurance coverage for its owned and/or operated properties. Coverage shall begin at 12:00 a.m. on November 1, 2014, and expire on the same date in 2015. Deductibles, limits and other coverage specifics must be per specifications included with this sheet.

---

BID II: Deductible Level = 1% (of value)

Property Coverage Carrier: \_\_\_\_\_

Windstorm Carrier:  
(if different from Fire Policy) \_\_\_\_\_

Property Carrier Best Rating: \_\_\_\_\_

Fire, Vandalism and Malicious  
Mischief Premium: \_\_\_\_\_

Windstorm Premium:  
(if carrier differs from  
fire policy) \_\_\_\_\_

Total Lump Sum Premium for 1 Year  
of Coverage as per specification  
without exception unless otherwise  
noted on this sheet: \_\_\_\_\_

---

Deviations, Comments or Explanations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agency Submitting this Proposal: \_\_\_\_\_

Account Manager/CSR Handling This Account: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Phone: \_\_\_\_\_

Signature of Agent Submitting This Proposal: \_\_\_\_\_

**PROPOSAL SHEET FOR PROPERTY INSURANCE  
COUNTY OF GALVESTON**

This proposal is submitted to provide the County of Galveston with insurance coverage for its owned and/or operated properties. Coverage shall begin at 12:00 a.m. on November 1, 2014, and expire on the same date in 2015. Deductibles, limits and other coverage specifics must be per specifications included with this sheet.

---

BID III: Deductible Level = 5% (of value)

Property Coverage Carrier: \_\_\_\_\_

Windstorm Carrier: \_\_\_\_\_  
(if different from Fire Policy)

Property Carrier Best Rating: \_\_\_\_\_

Fire, Vandalism and Malicious  
Mischief Premium: \_\_\_\_\_

Windstorm Premium: \_\_\_\_\_  
(if carrier differs from  
fire policy)

Total Lump Sum Premium for 1 Year  
of Coverage as per specification  
without exception unless otherwise  
noted on this sheet: \_\_\_\_\_

---

Deviations, Comments or Explanations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agency Submitting this Proposal: \_\_\_\_\_

Account Manager/CSR Handling This Account: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Phone: \_\_\_\_\_

Signature of Agent Submitting This Proposal: \_\_\_\_\_

**PROPOSAL SHEET FOR PROPERTY INSURANCE  
COUNTY OF GALVESTON**

This proposal is submitted to provide the County of Galveston with insurance coverage for its owned and/or operated properties. Coverage shall begin at 12:00 a.m. on November 1, 2014, and expire on the same date in 2015. Deductibles, limits and other coverage specifics must be per specifications included with this sheet.

---

BID IV: Flood (Attach Itemization of Premium by Location and Amounts Insured by Location)

Deductible Level=\$5,000

Flood Coverage Carrier: \_\_\_\_\_

Total Lump Sum Premium for one (1)

Year of coverage as per specification without  
exception unless otherwise  
noted on this sheet, or attachment: \_\_\_\_\_

---

Deviations, Comments or Explanations:

---

---

---

Agency Submitting this Proposal: \_\_\_\_\_

Account Manager/CS Handling this Account: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Phone: \_\_\_\_\_

Signature of Agent Submitting this Proposal: \_\_\_\_\_



**SECTION VI.**  
**AGENT INFORMATION SHEET**

NAME OF AGENCY: \_\_\_\_\_

TAX ID NUMBER: \_\_\_\_\_

NAME OF PERSON(S) HANDLING THIS ACCOUNT: \_\_\_\_\_

PERSON #2 (IF ANY): \_\_\_\_\_

ADDRESS OF AGENCY: \_\_\_\_\_

\_\_\_\_\_

PHONE NUMBER OF AGENCY: \_\_\_\_\_ FAX#: \_\_\_\_\_

SIZE OF AGENCY (IN TERMS OF PREMIUM COLLECTED): \_\_\_\_\_

NUMBER OF PEOPLE IN STAFF SERVICE OFFICE: \_\_\_\_\_

PLEASE LIST STAFF MEMBERS HANDLING THIS ACCOUNT ALONG WITH THEIR YEARS OF EXPERIENCE AND APPLICABLE EDUCATION.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE LIST ANY OUTSIDE SERVICING FIRMS YOU MAY USE IN CONJUNCTION WITH THIS ACCOUNT AND INCLUDE THEIR LOCATION.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE FEEL FREE TO MAKE ANY OTHER COMMENTS BELOW AND ALSO INCLUDE ANY PROMOTIONAL LITERATURE YOUR FIRM MAY PRODUCE.

\_\_\_\_\_

\_\_\_\_\_

**PROCUREMENT TIMELINE**

A timeline for this RFP and initial process is included below. Galveston County reserves the right to change these dates and will notify proposers of any changes:

Advertise RFP (first date of publication)	Wednesday	October 1, 2014
Advertise RFP (second date of publication)	Wednesday	October 8, 2014
Proposals due from proposers/RFP Opening	Thursday	October 16, 2014 at 2:00 p.m.

# **ATTACHMENT A**

**GALVESTON COUNTY BID-2014/2015**

Facility Name	Address	City	Zip Code	Standard Bldg size (SF)	County Estimated 100%RC Building Values	County Estimated 100%RC Contents Values	Property AOP Building Values 14-15	Property AOP Contents Values 14-15	TWIA Windstorm Buildings (80% RC)	TWIA Windstorm Contents (80% RC)	Flood Building	Flood Contents
Bacliff 832 Grand	823 Grand	Bacliff	77518	3,024	\$ 332,640.00	\$ -	\$ 332,640.00	\$ -	\$ 266,112.00	\$ -	\$ 332,640.00	\$ -
Bacliff Senior Center	4503 11th St	Bacliff	77518	2,080	\$ 264,948.00	\$ 22,290.00	\$ 264,948.00	\$ 22,290.00	\$ 211,958.00	\$ 22,290.00	\$ 265,000.00	\$ 22,300.00
Bacliff Justice of the Peace Office	4503C 11th St	Bacliff	77518	3,055	\$ 342,132.00	\$ 30,000.00	\$ 342,132.00	\$ 30,000.00	\$ 290,812.00	\$ 30,000.00	\$ 342,200.00	\$ 30,000.00
Crystal Beach Faggard Bldg	1750 SH 87	Crystal Beach	77650	2,688	\$ 277,285.00	\$ 5,000.00	\$ 277,285.00	\$ 5,000.00	\$ 236,938.00	\$ 5,000.00	\$ 278,800.00	\$ 5,000.00
Crystal Beach Fire Station	930 Noble Carl Dr	Crystal Beach	77650	11,484	\$ 3,300,051.00	\$ -	\$ 3,300,051.00	\$ -	\$ 3,300,000.00	\$ -	\$ 500,000.00	\$ -
Crystal Beach Eddie Barr Annex	946 Noble Carl Dr	Crystal Beach	77650	10,578	\$ 2,648,689.00	\$ 162,000.00	\$ 2,648,689.00	\$ 162,000.00	\$ 2,160,336.00	\$ 162,000.00	\$ 500,000.00	\$ 162,000.00
Dickinson Senior Center	2714 Hwy 3	Dickinson	77539	4,680	\$ 412,500.00	\$ 19,500.00	\$ 412,500.00	\$ 19,500.00	\$ 367,602.00	\$ 19,500.00	\$ 412,500.00	\$ 19,500.00
Dickinson Road and Bridge Main Office	5115 Hwy 3 (aka 5101-03)	Dickinson	77539	9,840	\$ 482,436.00	\$ 99,600.00	\$ 482,436.00	\$ 99,600.00	\$ 409,063.00	\$ 99,600.00	\$ 481,300.00	\$ 99,600.00
Dickinson Mosquito Control Main Office	5115 Hwy 3 (aka 36010 Hwy3)	Dickinson	77539	4,690	\$ 403,264.00	\$ -	\$ 403,264.00	\$ -	\$ 323,611.00	\$ -	\$ 3,438,200.00	\$ -
722 Moody Jail Annex and Parking Garage	713 19th (aka 1915 Ball)	Galveston	77550	231,000	\$ 16,736,435.00	\$ -	\$ 16,736,435.00	\$ -	\$ 4,424,000.00	\$ -	\$ 500,000.00	\$ -
722 Moody Records Storage	715 19th St	Galveston	77550	61,225	\$ 7,713,300.00	\$ 771,330.00	\$ 7,713,300.00	\$ 771,330.00	\$ 3,982,500.00	\$ 441,500.00	\$ 500,000.00	\$ 500,000.00
Popovich Building	1922-1928 Sealy St	Galveston	77550	8,288	\$ 1,354,688.00	\$ 128,000.00	\$ 1,354,688.00	\$ 128,000.00	\$ 1,083,750.00	\$ 128,000.00	\$ 500,000.00	\$ 127,500.00
Galveston Records and Recycling Building	2011 Sealy St	Galveston	77550	12,812	\$ 901,238.00	\$ 33,000.00	\$ 901,238.00	\$ 33,000.00	\$ 766,052.00	\$ 33,000.00	\$ 500,000.00	\$ 33,000.00
Galveston Mosquito Control Building	2715 Comanche Dr	Galveston	77554	5,600	\$ 312,500.00	\$ 70,000.00	\$ 312,500.00	\$ 70,000.00	\$ 265,625.00	\$ 70,000.00	\$ 312,500.00	\$ 70,000.00
San Luis Pass Toll Booth	35930 Hwy 3005	Galveston	77554	144	\$ 127,299.00	\$ -	\$ 127,299.00	\$ -	\$ 101,839.00	\$ -	Not Eligible	Not Eligible
Justice Center Jail/Law Enforcement #1 (Combined as One Bldg-Prop-Wind)	5700 Ave H (aka 601-701 54th)	Galveston	77550	407,773	\$ 68,750,000.00	\$ 3,725,200.00	\$ 68,750,000.00	\$ 3,725,200.00	Not Eligible	Not Eligible	\$ 500,000.00	\$ 500,000.00
Justice Center Skills Bldg(Rear)	5700 Ave H-Rear	Galveston	77550	12,150	\$ 1,593,750.00	\$ 100,000.00	\$ 1,593,750.00	\$ 100,000.00	\$ 1,275,000.00	\$ 100,000.00	\$ 500,000.00	\$ 500,000.00
Justice Center Fire Station #5	5728 Ave H	Galveston	77550	11,484	\$ 3,500,725.00	\$ -	\$ 3,500,725.00	\$ -	\$ 3,500,725.00	\$ -	\$ 500,000.00	\$ 100,000.00
Justice Center Central Plant Building	5800 Ave H	Galveston	77550	12,826	\$ 5,530,000.00	\$ -	\$ 5,530,000.00	\$ -	\$ 4,424,000.00	\$ -	\$ 500,000.00	\$ 500,000.00
Justice Center Courts Building	600 59th St	Galveston	77550	190,972	\$ 38,653,813.00	\$ 4,000,000.00	\$ 38,653,813.00	\$ 4,000,000.00	\$ 3,200,000.00	\$ 1,224,000.00	\$ 500,000.00	\$ 500,000.00
722 Moody Courthouse	702-724 Moody Ave	Galveston	77550	190,972	\$ 24,039,721.00	\$ 1,653,000.00	\$ 24,039,721.00	\$ 1,653,000.00	\$ 3,200,000.00	\$ 1,224,000.00	\$ 500,000.00	\$ 500,000.00

**GALVESTON COUNTY BID-2014/2015**

Facility Name	Address	City	Zip Code	Standard Bldg size (SF)	County Estimated 100%RC Building Values	County Estimated 100%RC Contents Values	Property AOP Building Values 14-15	Property AOP Contents Values 14-15	TWIA Windstorm Buildings (80% RC)	TWIA Windstorm Contents (80% RC)	Flood Building	Flood Contents
722 Moody Courthouse Annex	708-716C 21St	Galveston	77550	22,080	\$ 3,163,564.00	\$ 331,200.00	\$ 3,163,564.00	\$ 331,200.00	\$ 2,688,125.00	\$ 331,200.00	\$ 500,000.00	\$ 331,200.00
722 Moody Central Plant Building	722 Moody (aka 1917 Winnie)	Galveston	77550	13,280	\$ 1,560,108.00	\$ -	\$ 1,560,108.00	\$ -	\$ 1,450,522.00	\$ -	\$ -	\$ -
Llewellyn Building	818 Moody Ave	Galveston	77550	21,859	\$ 2,732,375.00	\$ 327,885.00	\$ 2,732,375.00	\$ 327,885.00	Not Eligible	Not Eligible	\$ 500,000.00	\$ 100,000.00
Jack Brooks Park Rodeo Arena	5700 FM 2004	Hitchcock	77563	78,406	\$ 1,785,573.00	\$ -	\$ 1,785,573.00	\$ -	\$ 1,428,458.00	\$ -	Not Eligible	Not Eligible
La Marque Justice of the Peace Office	203 Vauthier St	LaMarque	77568	4,836	\$ 346,632.00	\$ 69,750.00	\$ 346,632.00	\$ 69,750.00	\$ 307,381.00	\$ 69,750.00	\$ 361,700.00	\$ 69,800.00
Carbide Park Wayne Johnson Community Center	4102 FM 519	LaMarque	77568	14,656	\$ 2,406,250.00	\$ 112,500.00	\$ 2,406,250.00	\$ 112,500.00	\$ 1,925,000.00	\$ 112,500.00	\$ 500,000.00	\$ 112,500.00
Carbide Park Admin-Service Center	4102 FM 519	LaMarque	77568	2,660	\$ 244,378.00	\$ 22,000.00	\$ 244,378.00	\$ 22,000.00	\$ 195,502.00	\$ 22,000.00	\$ 244,400.00	\$ 22,000.00
Carbide Park Cooperative Extension Service Office	4102 FM 519 (aka Main)	LaMarque	77568	14,908	\$ 3,022,418.00	\$ 206,205.00	\$ 3,022,418.00	\$ 206,205.00	\$ 3,022,418.00	\$ 206,205.00	\$ 500,000.00	\$ -
Jack Brooks Park Ball Field Complex	5700A FM 2004	LaMarque	77563	2,570	\$ 256,610.00	\$ -	\$ 256,610.00	\$ -	\$ 218,450.00	\$ -	\$ 257,000.00	\$ -
Flood Control Pump Station-La Marque	1100 Levee Road	LaMarque	77590	2,048	\$ 5,200,000.00	\$ 264,000.00	\$ 5,200,000.00	\$ 264,000.00	\$ 4,160,000.00	\$ 264,000.00	\$ 500,000.00	\$ 500,000.00
League City Annex	174 Calder Road (aka 1110 Calder)	League City	77573	18,117	\$ 2,213,750.00	\$ 245,955.00	\$ 2,213,750.00	\$ 245,955.00	\$ 1,771,000.00	\$ 245,955.00	\$ 500,000.00	\$ 246,000.00
Walter Hall Park Service Center	807 Highway 3 North	League City	77573	2,840	\$ 298,290.00	\$ 7,500.00	\$ 298,290.00	\$ 7,500.00	\$ 238,632.00	\$ 7,500.00	\$ 250,000.00	\$ 75,000.00
Walter Hall Park Community Center	807 Highway 3 North	League City	77573	9,150	\$ 1,412,309.00	\$ 50,000.00	\$ 1,412,309.00	\$ 50,000.00	\$ 1,166,625.00	\$ 50,000.00	\$ 500,000.00	\$ 50,000.00
League City Emergency Management	1353 FM 646	League City	77539	24,710	\$ 7,375,000.00	\$ 352,500.00	\$ 7,375,000.00	\$ 352,500.00	\$ 4,071,500.00	\$ 352,500.00	\$ 500,000.00	\$ 352,500.00
League City Communication Tower	1353 Highway FM646	League City	77573	199 Ft High	\$ 255,664.00	\$ -	\$ 255,664.00	\$ -	\$ 204,531.00	\$ -	Not Eligible	Not Eligible
Bayshore Park Restroom	2700 E Bayshore Dr	San Leon	77539	462	\$ 179,638.00	\$ -	\$ 179,638.00	\$ -	\$ 143,710.00	\$ -	No EC	No EC
West County Annex	11730 Hwy 6	Santa Fe	77510	6,669	\$ 1,375,000.00	\$ 95,000.00	\$ 1,375,000.00	\$ 95,000.00	\$ 1,168,750.00	\$ 95,000.00	\$ 500,000.00	\$ 95,000.00
Runge Park Covered Arena	4605 Peck	Santa Fe	77510	13,200	\$ 335,994.00	\$ -	\$ 335,994.00	\$ -	\$ 280,351.00	\$ -	Not Eligible	Not Eligible
Runge Park Community Center	4605 Peck	Santa Fe	77510	3,200	\$ 278,620.00	\$ 27,750.00	\$ 278,620.00	\$ 27,750.00	\$ 231,090.00	\$ 27,750.00	\$ 275,000.00	\$ 27,800.00
West County Service Center-Truck Shed	5101 H	Santa Fe	77510	5,835	\$ 482,436.00	\$ 22,000.00	\$ 482,436.00	\$ 22,000.00	\$ 409,063.00	\$ 22,000.00	\$ -	\$ -
Texas City Annex	2516 Texas Ave	Texas City	77590	12,282	\$ 2,062,500.00	\$ 186,600.00	\$ 2,062,500.00	\$ 186,600.00	\$ 1,650,000.00	\$ 186,600.00	\$ 500,000.00	\$ 185,000.00

**GALVESTON COUNTY BID-2014/2015**

Facility Name	Address	City	Zip Code	Standard Bldg size (SF)	County Estimated 100%RC Building Values	County Estimated 100%RC Contents Values	Property AOP Building Values 14-15	Property AOP Contents Values 14-15	TWIA Windstorm Buildings (80% RC)	TWIA Windstorm Contents (80% RC)	Flood Building	Flood Contents
Flood Control Equipment Repair-Texas City	2601 Loop 197 South	Texas City	77590	4,500	\$ 343,750.00	\$ -	\$ 343,750.00	\$ -	\$ 292,188.00	\$ -	\$ 343,800.00	\$ -
Flood Control Pump Station-Texas City	2601 Loop 197 South	Texas City	77590	2,715	\$ 5,200,000.00	\$ 264,000.00	\$ 5,200,000.00	\$ 264,000.00	\$ 4,160,000.00	\$ 264,000.00	\$ 500,000.00	\$ 500,000.00
Texas City Animal Shelter	3412 Loop 197 N	Texas City	77590	5,033	\$ 675,991.00	\$ 20,000.00	\$ 675,991.00	\$ 20,000.00	\$ 548,811.00	\$ 20,000.00	\$ 500,000.00	\$ 20,000.00
Texas City Animal Resource Center	3412 Loop 197 N	Texas City	77590	30,000	\$ 3,659,400.00	\$ 422,683.00	\$ 3,659,400.00	\$ 422,683.00	\$ 2,927,520.00	\$ 338,147.00	\$ 500,000.00	\$ 50,000.00
Texas City Kennel A (Animal Resource Center)	3412 Loop 197 N	Texas City	77590	3,750	\$ 374,847.00	\$ 2,000.00	\$ 374,847.00	\$ 2,000.00	\$ 299,878.00	\$ -	\$ 374,900.00	\$ 2,000.00
Texas City Kennel B (Animal Resource Center)	3412 Loop 197 N	Texas City	77590	3,750	\$ 374,847.00	\$ 2,000.00	\$ 374,847.00	\$ 2,000.00	\$ 299,878.00	\$ -	\$ 374,900.00	\$ 2,000.00
Jerry J Esmond Juvenile Justice Center	5500-6101 Attwater	Texas City	77590	36,704	\$ 8,692,908.00	\$ 250,000.00	\$ 8,692,908.00	\$ 250,000.00	\$ 4,174,000.00	\$ 250,000.00	\$ 500,000.00	\$ 250,000.00
Texas City Medical Examiners	6607 Hwy 1764	Texas City	77590	5,650	\$ 757,625.00	\$ 42,250.00	\$ 757,625.00	\$ 42,250.00	\$ 643,981.00	\$ 42,250.00	\$ 500,000.00	\$ 42,300.00
Flood Control Machinery House-Moses Lake	8701 Skyline Dr	Texas City	77591	1,344	\$ 3,783,117.00	\$ 1,000,000.00	\$ 3,783,117.00	\$ 1,000,000.00	\$ 2,400,000.00	\$ 1,000,000.00	\$ 500,000.00	\$ -
Flood Control Building-Moses Lake	8701 Skyline Dr	Texas City	77591	110	\$ 500,848.00	\$ 500,000.00	\$ 500,848.00	\$ 500,000.00	Not Eligible	Not Eligible	\$ 500,000.00	\$ -
Mid County Annex	9850 Emmett F Lowry Expwy	Texas City	77590	122,170	\$ 22,226,993.00	\$ 1,950,000.00	\$ 22,226,993.00	\$ 1,950,000.00	\$ 2,474,000.00	\$ 1,950,000.00	\$ 500,000.00	\$ 500,000.00
Justice Center Jail/Law Enforcement #2 (Combined as One Bldg-Prop-Wind)	5700 Ave H (aka 601- 701 54th)	Galveston	77550	Included	Incl	Incl	included	Included	Included	Included	\$ 500,000.00	\$ 500,000.00
<b>TOTALS</b>					\$ 260,922,209.00	\$ 17,592,698.00	\$ 260,922,209.00	\$ 17,592,698.00	\$ 78,474,175.00	\$ 9,416,247.00	\$ 23,512,200.00	\$ 7,702,000.00

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2015

GIA

11-282181

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136560  
 CURRENT PROPERTY ADDRESS:  
 900 HIGHWAY 117  
 CARETAKERS DWELLING  
 PORT BOLIVAR, TX 77650-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
-----	-----	-----	-----
09/13/2008	33378.65	.00	33378.65

RECEIVED

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY JAN 28 2013

GIA

11-282190

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136569  
CURRENT PROPERTY ADDRESS:  
3412 LOOP 197 N  
ANIMAL SHELTER  
TEXAS CITY, TX 77590-4408

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	5492.28	.00	5492.28



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 24 2017  
GIA

11-262427

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136558  
CURRENT PROPERTY ADDRESS:  
13300 FM 3005 RD  
BEACH POCKET PRK 3 PAVILLION  
GALVESTON, TX 77554-7761

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
----- 09/13/2008	----- 10192.37	----- .00	----- 10192.37

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
FSA

11-262426

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136557  
CURRENT PROPERTY ADDRESS:  
13300 FM 3005 RD  
BEACH POCKET PARK 3 CONCESSION  
GALVESTON, TX 77554-7761

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	9279.17	.00	9279.17

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2009  
GMA

11-262425

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136548  
CURRENT PROPERTY ADDRESS:  
946 CARL NOBLE DR  
JAIL AND COURTHOUSE  
CRYSTAL BEACH, TX 77650-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	261330.72	72236.53	333567.25

*AG*  
*10/12* RECEIVED  
SEP 04 2012

*H 928*  
*SB*

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY *GIA*

06-414542

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150448243  
CURRENT PROPERTY ADDRESS:  
11743 FM 3005 RD  
BEACH POCKET PARK 2 CONCESSION  
GALVESTON, TX 77554-6293

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	10325.29	.00	10325.29

*C. J. #928 SB*  
RECEIVED

SEP 04 2017

GIA

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

06-414541

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150448242  
CURRENT PROPERTY ADDRESS:  
11743 FM 3005 RD  
BEACH POCKET PARK 2 BATHROOMS  
GALVESTON, TX 77554-6293

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	5199.86	.00	5199.86

RECEIVED  
JAN 28 2010  
GIA

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-282184

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136563  
CURRENT PROPERTY ADDRESS:  
2715 COMANCHE DR  
MOSQUITO CONTROL  
GALVESTON, TX 77554-6276

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1970 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866 395 7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	47335.43	.00	47335.43

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-262183

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136562  
CURRENT PROPERTY ADDRESS:  
1910 SEALY ST  
YOUTH SERVICE  
GALVESTON, TX 77550-2327

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	111416.32	24237.03	135653.35

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2008

GIA

11-262178

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136553

CURRENT PROPERTY ADDRESS:

724 MOODY AVE

GALVESTON, TX 77550-2303

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	500000.00	168392.49	668392.49



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-282177

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136552  
CURRENT PROPERTY ADDRESS:  
1750 STATE HIGHWAY 87  
COURTHOUSE  
CRYSTAL BEACH, TX 77650-9999

RECEIVED

JAN 28 2013

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	146293.22	12772.35	159065.57

RECEIVED

JAN 28 2013

GIA

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-262190

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136559

CURRENT PROPERTY ADDRESS:

716C 21ST ST

GALVESTON, TX 77550-2303

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	165000.00	35672.99	200672.99

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

11-262168

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136533  
CURRENT PROPERTY ADDRESS:  
135 ROSENBERG ST  
GALVESTON, TX 77550-1403

JAN 28 2013

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/12/2008	500000.00	52500.00	552500.00
09/11/1998	30566.07	.00	30566.07

RECEIVED

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

JAN 28 2013

GIA

11-282175

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136550  
CURRENT PROPERTY ADDRESS:  
2009 SEALY ST  
COUNTY WAREHOUSE  
GALVESTON, TX 77550-2314

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	24740.79	.00	24740.79

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

11-262174

GIA

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136549  
CURRENT PROPERTY ADDRESS:  
2201 AVENUE L  
SENIOR CITIZENS CTR  
GALVESTON, TX 77550-4725

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	255302.99	55058.03	310361.02

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

11-262173

GIA

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136543  
CURRENT PROPERTY ADDRESS:  
5700 AVENUE H REAR  
GALVESTON, TX 77551-8100

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	4392.80	.00	4392.80

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

GIA

11-262179

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136555  
CURRENT PROPERTY ADDRESS:  
711 19TH ST  
GALVESTON COUNTY JAIL  
GALVESTON, TX 77550-2301

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	500000.00	.00	500000.00

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2015  
GIA

11-262178

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136551  
CURRENT PROPERTY ADDRESS:  
818 MOODY AVE  
OLD TRANSIT BUILDING  
GALVESTON, TX 77550-2305

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-398-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	310641.91	54892.45	365534.36



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

11-262207

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136586  
CURRENT PROPERTY ADDRESS:  
1928 SEALY ST  
OFFICE CT  
GALVESTON, TX 77550-2327

JAN 28 2013

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866 395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
09/13/2008	213757.93	101718.82	315476.75

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

GIA

11-282197

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136576

CURRENT PROPERTY ADDRESS:

GENERAL DELIVERY

92000 HIGHWAY 146

SAN LEON, TX 77539-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-795 7426.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
-----	-----	-----	-----
09/13/2008	77586.56	1108.65	78695.21
06/08/2001	12549.56	.00	12549.56

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224163

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150136548  
 CURRENT PROPERTY ADDRESS:  
 946 CARL NOBLE DR  
 JAIL AND COURTHOUSE  
 CRYSTAL BEACH, TX 77650-9999

RECEIVED  
 FEB 03 2014  
 GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395 7496.

DATE OF LOSS -----	BUILDING PAYMENTS -----	CONTENTS PAYMENTS -----	TOTAL PAYMENTS -----
09/13/2008	261330.72	72236.53	333567.25

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224160

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150136544

CURRENT PROPERTY ADDRESS:

807 HIGHWAY 3 N

LEAGUE CITY, TX 77573-2215

RECEIVED

FEB 03 2014

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224161

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150136546  
 CURRENT PROPERTY ADDRESS:  
 4102 FM 519 RD  
 COMMUNITY CTR  
 LA MARQUE, TX 77568-4666

RECEIVED  
 FEB 03 2016

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL PLAINMAN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224162

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150136547

CURRENT PROPERTY ADDRESS:

4102 FM 519 RD

ADMIN SERVICE CTR

LA MARQUE, TX 77568-4666

RECEIVED

FEB 03 2016

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1976 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224164

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150  
CURRENT PROPERTY ADDRESS:  
1353 FM646 RD  
GENERAL DELIVERY  
LEAGUE CITY, TX 77372-9999

RECEIVED  
FEB 03 2014

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224179

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150182795

CURRENT PROPERTY ADDRESS:

713 19TH ST

GALVESTON, TX 77550-2301

RECEIVED

FEB 03 2014

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 856-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BLOCCERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224183

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150868270  
CURRENT PROPERTY ADDRESS: RECEIVED  
3412 LOOP 197 N  
NEW BLDG  
TEXAS CITY, TX 77590-4408  
FEB 03 2014  
GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
NO LOSSES ON FILE			

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBSITE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224184

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150868274  
CURRENT PROPERTY ADDRESS:  
3412 LOOP 197 N  
NW KENNEL  
TEXAS CITY, TX 77590-4408

RECEIVED

FEB 03 2014

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-224185

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./115086827  
 CURRENT PROPERTY ADDRESS:  
 3412 LOOP 197 N  
 NE KENNEL  
 TEXAS CITY, TX 77590-4408

RECEIVED  
 FEB 03 2014

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

321521

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150321951  
 CURRENT PROPERTY ADDRESS:  
 9300 EMMETT F LOWRY EXPY  
 AKA 9850 EMMETT F LOWRY EXPY  
 TEXAS CITY, TX 77591-2132

RECEIVED  
 JUN 27 2014  
 GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL ADOPTED LOCAL GOVERNMENT OFFICIAL OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBSITE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

08-387635

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150964939  
 CURRENT PROPERTY ADDRESS: 4102 MAIN ST  
 LA MARQUE, TX 77568-4666

RECEIVED  
 OCT 28 2013

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS -----	BUILDING PAYMENTS -----	CONTENTS PAYMENTS -----	TOTAL PAYMENTS -----
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

#928  
SB  
Co of Galv

07-436605

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150541053  
CURRENT PROPERTY ADDRESS:  
5728 AVENUE H  
GALVESTON, TX 77551-8100

RECEIVED

SEP 26 2013

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 100 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

GIA

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBSITE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

#920  
SB  
Co of Galv

07-436605

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150541053  
CURRENT PROPERTY ADDRESS:  
5728 AVENUE H  
GALVESTON, TX 77551-8100

RECEIVED  
SEP 26 2013

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

06-401694  
# 928  
SB

06-401694

SEP 03 2017

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150930888  
CURRENT PROPERTY ADDRESS:  
GENERAL DELIVERY  
930 NOBLE CARL DR  
CRYSTAL BEACH, TX 77650-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBSITE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

*Co/Buyer  
# 425  
3B*

04-341817

CURRENT COMPANY/POLICY NUMBER: WRIGHT NATIONAL FLOOD INS. CO./1150321951  
 CURRENT PROPERTY ADDRESS:  
 9300 EMMETT F LOWRY EXPY  
 TEXAS CITY, TX 77591-2132

RECEIVED  
 JUN 26 2013  
 GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. LOSSES OCCURRING WITHIN 180 DAYS PRIOR TO THIS LOSS HISTORY MAY NOT BE INCLUDED IN THIS REPORT. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS .....	BUILDING PAYMENTS .....	CONTENTS PAYMENTS .....	TOTAL PAYMENTS .....
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

THE FLOOD MITIGATION ASSISTANCE (FMA) PROGRAM WAS AUTHORIZED BY THE NATIONAL FLOOD INSURANCE REFORM ACT OF 1994 AND AMENDED BY THE BIGGERT-WATERS FLOOD INSURANCE REFORM ACT OF 2012. THE FMA PROGRAM PROVIDES FUNDS ON AN ANNUAL BASIS TO STATES AND LOCAL COMMUNITIES FOR PROJECTS THAT EITHER REDUCE OR ELIMINATE THE LONG-TERM RISK OF FLOOD DAMAGE TO BUILDINGS, HOMES, AS WELL AS OTHER STRUCTURES THAT ARE INSURED UNDER THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP). THE FMA PROGRAM PROVIDES FEDERAL GRANT FUNDS FOR ELIGIBLE MITIGATION ACTIVITIES, SUCH AS ELEVATING AN NFIP-INSURED STRUCTURE. MITIGATED PROPERTIES MAY ALSO QUALIFY FOR REDUCED FLOOD INSURANCE RATES. AS AN INDIVIDUAL, YOU MAY NOT APPLY FOR AN FMA GRANT ON YOUR OWN, BUT YOUR LOCAL COMMUNITY OR COUNTY MAY APPLY FOR A GRANT ON YOUR BEHALF. TO OBTAIN ADDITIONAL INFORMATION ON THE FMA PROGRAM AND OTHER MITIGATION GRANT PROGRAMS, PLEASE CONTACT YOUR LOCAL FLOODPLAIN MANAGER OR STATE HAZARD MITIGATION OFFICER, OR GO TO THE FEMA HAZARD MITIGATION ASSISTANCE WEBPAGE AT [www.fema.gov/hazard-mitigation-assistance](http://www.fema.gov/hazard-mitigation-assistance).

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-282189

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136568  
CURRENT PROPERTY ADDRESS:  
2514 TEXAS AVE  
OFFICES  
TEXAS CITY, TX 77590-8229

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR  
CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE  
PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT  
THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2011

GIA

11-282188

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136567  
CURRENT PROPERTY ADDRESS:  
6607 HIGHWAY 1764  
MEDICAL EXAMINERS  
TEXAS CITY, TX 77591-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395 7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 7 113

GA

11-282187

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136566

CURRENT PROPERTY ADDRESS:

203 VAUTHIER ST

COURTHOUSE

LA MARQUE, TX 77568-7612

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

RECEIVED  
JAN 28 2013  
GIA

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-282188

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136565  
CURRENT PROPERTY ADDRESS:  
1207 OAK ST  
COUNTY HEALTH BLDG  
LA MARQUE, TX 77568-5925

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395 7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
-----	-----	-----	-----
NO LOSSES ON FILE			

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 1973

GIA

11-282201

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136580  
CURRENT PROPERTY ADDRESS:  
5115C HIGHWAY 3  
TRUCK STORAGE  
DICKINSON, TX 77539-6831

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7486.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-282200

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136579  
CURRENT PROPERTY ADDRESS:  
5103 HIGHWAY 3  
DICKINSON, TX 77539-6811

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 24 2013

11-262188

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136578  
CURRENT PROPERTY ADDRESS:  
2714 HIGHWAY 3  
SENIOR CITIZENS BLDG  
DICKINSON, TX 77539-7816

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

GIA

11-262198

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136577  
CURRENT PROPERTY ADDRESS:  
11710 HIGHWAY 6  
COURTHOUSE  
SANTA FE, TX 77510-8273

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR  
CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE  
PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT  
THE NFIP AT 855-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

RECEIVED

JAN 28 2013

GIA

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-282108

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1130136575  
CURRENT PROPERTY ADDRESS:  
4503C 11TH ST  
JUSTICE OF PEACE  
BACLIFF, TX 77518-2206

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

11-282195

GA

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136574  
CURRENT PROPERTY ADDRESS:  
4503 11TH ST  
BACLIFF, TX 77518-2206

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 24 2013  
GL

11-262194

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136573  
CURRENT PROPERTY ADDRESS:  
GENERAL DELIVERY  
2604 ROUTE 97 N  
TEXAS CITY, TX 77590-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

11-262193

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136572 GIA  
CURRENT PROPERTY ADDRESS:  
GENERAL DELIVERY  
2601 ROUTE 97 N  
TEXAS CITY, TX 77590-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2008

GJA

11-262192

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136571

CURRENT PROPERTY ADDRESS:

2601A LOOP 197 S

EQUIPMENT REPAIR

TEXAS CITY, TX 77590-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

GIA

11-282209

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136588  
CURRENT PROPERTY ADDRESS:  
1100 LEVY RD  
PUMP HOUSE  
LA MARQUE, TX 77568 9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

11-262208

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136587  
CURRENT PROPERTY ADDRESS:  
2601B LOOP 197 S  
PUMP HOUSE  
TEXAS CITY, TX 77590-9999

GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 29 2013

GIA

11-282208

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136585  
CURRENT PROPERTY ADDRESS:  
4605 PECK  
COMMUNITY CTR  
SANTA FE, TX 77517-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-262205

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136584  
CURRENT PROPERTY ADDRESS:  
5700 B FM2004  
RESTROOM PAVILLION  
HITCHCOCK, TX 77568-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR  
CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE  
PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT  
THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GA

11-262204

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136583  
CURRENT PROPERTY ADDRESS:  
5700 A FM 2004  
BASEBALL COMPLEX  
HITCHCOCK, TX 77568-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
.....	.....	.....	.....

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

625

11-282203

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136582  
CURRENT PROPERTY ADDRESS:  
174 CALDER DR  
LEAGUE CITY, TX 77573-3679

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-262202

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136581  
CURRENT PROPERTY ADDRESS:  
5115 HIGHWAY 3  
MOBQUITO TRUCK STORAGE  
DICKINSON, TX 77539-6831

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

GIA

11-282210

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136599  
CURRENT PROPERTY ADDRESS:  
807 HIGHWAY 3 S  
COMMUNITY CTR  
LEAGUE CITY, TX 77573-5405

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-282172

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136542  
CURRENT PROPERTY ADDRESS:  
5800 AVENUE H  
GALVESTON, TX 77551-8102

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

RECEIVED

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

JAN 28 2013

GA

11-262171

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136541  
CURRENT PROPERTY ADDRESS:  
601 54TH ST  
GALVESTON, TX 77551-4246

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GIA

11-262170

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136540  
CURRENT PROPERTY ADDRESS:  
600 59TH ST  
GALVESTON, TX 77551-4178

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GA

11-252100

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136539  
CURRENT PROPERTY ADDRESS:  
5700 AVENUE H  
GALVESTON, TX 77551-0100

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2010  
GIA

11-282182

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136561  
CURRENT PROPERTY ADDRESS:  
900 HIGHWAY 87  
CABANA SHELTER  
PORT BOLIVAR, TX 77650-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866 395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 28 2013

11-262185

GIA

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136564  
CURRENT PROPERTY ADDRESS:  
1205 OAK ST  
ENVIRONMENTAL HEALTH  
LA MARQUE, TX 77568-5925

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

11-202191

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136570  
CURRENT PROPERTY ADDRESS:  
5500 ATWATER  
JUNEVILLE DETENTION  
TEXAS CITY, TX 77590-9999

JAN 28 2013

GLA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JUN 27 2003  
GA

11-262431

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150141173  
CURRENT PROPERTY ADDRESS:  
1353 FM646 RD  
GENERAL DELIVERY  
LEAGUE CITY, TX 77372-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-262430

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150141172  
CURRENT PROPERTY ADDRESS:  
5500 INDUSTRIAL  
CLASSROOM 3  
TEXAS CITY, TX 77590-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING	CONTENTS	TOTAL
-----	PAYMENTS	PAYMENTS	PAYMENTS
-----	-----	-----	-----

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-262429

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150141171  
CURRENT PROPERTY ADDRESS:  
5500 INDUSTRIAL DETENTION  
CLASSROOM 2  
TEXAS CITY, TX 77590-9999

RECEIVED  
JAN 28 2018  
FSA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE



NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
SEA

11-262428

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150141170  
CURRENT PROPERTY ADDRESS:  
5500 INDUSTRIAL RD  
CLASSROOM 1  
TEXAS CITY, TX 77590-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS -----	BUILDING PAYMENTS -----	CONTENTS PAYMENTS -----	TOTAL PAYMENTS -----
-----------------------	-------------------------------	-------------------------------	----------------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 23 2010

GA

11-262424

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136547  
CURRENT PROPERTY ADDRESS:  
4102 FM 519 RD  
ADMIN SERVICE CTR  
LA MARQUE, TX 77568-4666

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING	CONTENTS	TOTAL
-----	PAYMENTS	PAYMENTS	PAYMENTS
-----	-----	-----	-----

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED

JAN 23 2013

11-262423

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136546  
CURRENT PROPERTY ADDRESS:  
4102 FM 519 RD  
COMMUNITY CTR  
LA MARQUE, TX 77568-4666

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING	CONTENTS	TOTAL
.....	PAYMENTS	PAYMENTS	PAYMENTS
.....	.....	.....	.....

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 29 2013  
GIA

11-262446

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150182795  
CURRENT PROPERTY ADDRESS:  
713 19TH ST  
GALVESTON, TX 77550-2301

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING	CONTENTS	TOTAL
-----	PAYMENTS	PAYMENTS	PAYMENTS
-----	-----	-----	-----

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

11-262449

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150869270  
CURRENT PROPERTY ADDRESS:  
3412 LOOP 197 N  
NEW BLDG  
TEXAS CITY, TX 77590-4408

RECEIVED  
JAN 28 2010  
GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING	CONTENTS	TOTAL
-----	PAYMENTS	PAYMENTS	PAYMENTS
-----	-----	-----	-----

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GMA

11-262450

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150868274  
CURRENT PROPERTY ADDRESS:  
3412 LOOP 197 N  
NW KENNEL  
TEXAS CITY, TX 77590-4408

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013  
GMA

11-262422

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150136544  
CURRENT PROPERTY ADDRESS:  
807 HIGHWAY 3 N  
LEAGUE CITY, TX 77573-2215

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

RECEIVED  
JAN 28 2013

11-262451

GIA

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150868275  
CURRENT PROPERTY ADDRESS:  
3412 LOOP 197 N  
NE KENNEL  
TEXAS CITY, TX 77590-4408

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE



#928

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

07-434282

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150541053  
CURRENT PROPERTY ADDRESS:  
5728 AVENUE H  
GALVESTON, TX 77551-8100

RECEIVED  
SEP 28 2012  
GIA

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE

*copy*  
RECEIVED  
SEP 04 2012  
GIA #923  
SB

NATIONAL FLOOD INSURANCE PROGRAM PROPERTY LOSS HISTORY

06-414562

CURRENT COMPANY/POLICY NUMBER: FIDELITY NAT. INDEMNITY INS. C/1150824944  
CURRENT PROPERTY ADDRESS:  
GENERAL DELIVERY  
930 NOBLE CARL DR  
CRYSTAL BEACH, TX 77650-9999

THE INFORMATION PROVIDED BELOW IS THE FLOOD INSURANCE LOSS PAYMENT HISTORY FOR CLAIMS PAID BY THE NATIONAL FLOOD INSURANCE PROGRAM SINCE 1978 FOR THE ABOVE PROPERTY ADDRESS. IF YOU HAVE ANY QUESTIONS ABOUT THIS INFORMATION PLEASE CONTACT THE NFIP AT 866-395-7496.

DATE OF LOSS	BUILDING PAYMENTS	CONTENTS PAYMENTS	TOTAL PAYMENTS
--------------	----------------------	----------------------	-------------------

NO LOSSES ON FILE



**ROCK HILL**  
INSURANCE COMPANY

700 W. 47th Street, Suite 350  
Kansas City, MO 64112  
Fax: (877) 742-8762 Ph:(816) 412-2800

August 25, 2014

Marilyn Svec  
AmWINS Insurance Brokers-Houston fka Colemont  
840 Gessner, Suite 250  
Houston, TX 77024

Re: Loss Run

Named Insured: County of Galveston  
Policy #: CPX000615-06  
Effective Date: 11/01/2012

Dear Marilyn :

Our records show no losses for this insured and/or policy number.

This is not to be construed as an absolute statement of no claims, only that no loss history has been located for this insured with this policy number.

Loss Runs are current as of August 25, 2014.

Sincerely,

Kristen Johnson  
Claims Examiner  
403 Corporate Center Drive  
Suite 200  
Stockbridge, GA 30281  
kjohnson@rhkc.com

REFERENCE #:0680959

Rockhill Underwriting Management, LLC  
d/b/a in California RHKC Insurance Services, LLC



**ROCKHILL**  
INSURANCE COMPANY

700 W. 47th Street, Suite 350  
Kansas City, MO 64112  
Fax: (877) 742-8762 Ph:(816) 412-2800

August 25, 2014

Marilyn Svec  
AmWINS Insurance Brokers-Houston fka Colemont  
840 Gessner, Suite 250  
Houston, TX 77024

Re: Loss Run

Named Insured: County of Galveston  
Policy #: CWX000027-05  
Effective Date: 11/01/2011

Dear Marilyn :

Our records show no losses for this insured and/or policy number.

This is not to be construed as an absolute statement of no claims, only that no loss history has been located for this insured with this policy number.

Loss Runs are current as of August 25, 2014.

Sincerely,

Kristen Johnson  
Claims Examiner  
403 Corporate Center Drive  
Suite 200  
Stockbridge, GA 30281  
kjohnson@rhkc.com

REFERENCE #:0657090

Rockhill Underwriting Management, LLC  
d/b/a in California RHKC Insurance Services, LLC



**ROCK HILL**  
INSURANCE COMPANY

700 W. 47th Street, Suite 350  
Kansas City, MO 64112  
Fax: (877) 742-8762 Ph:(816) 412-2800

August 25, 2014

Marilyn Svec  
AmWINS Insurance Brokers-Houston fka Colemont  
840 Gessner, Suite 250  
Houston, TX 77024

Re: Loss Run

Named Insured: County of Galveston  
Policy #: CWX000027-04  
Effective Date: 11/01/2010

Dear Marilyn :

Our records show no losses for this insured and/or policy number.

This is not to be construed as an absolute statement of no claims, only that no loss history has been located for this insured with this policy number.

Loss Runs are current as of August 25, 2014.

Sincerely,

Kristen Johnson  
Claims Examiner  
403 Corporate Center Drive  
Suite 200  
Stockbridge, GA 30281  
kjohnson@rhkc.com

REFERENCE #:0633490

Rockhill Underwriting Management, LLC  
d/b/a in California RHKC Insurance Services, LLC



**ROCKHILL**  
INSURANCE COMPANY

700 W. 47th Street, Suite 350  
Kansas City, MO 64112  
Fax: (877) 742-8762 Ph:(816) 412-2800

August 25, 2014

Marilyn Svec  
AmWINS Insurance Brokers-Houston fka Colemont  
840 Gessner, Suite 250  
Houston, TX 77024

Re: Loss Run

Named Insured: County of Galveston  
Policy #: CWX000027-03  
Effective Date: 11/01/2009

Dear Marilyn :

Our records show no losses for this insured and/or policy number.

This is not to be construed as an absolute statement of no claims, only that no loss history has been located for this insured with this policy number.

Loss Runs are current as of August 25, 2014.

Sincerely,

Kristen Johnson  
Claims Examiner  
403 Corporate Center Drive  
Suite 200  
Stockbridge, GA 30281  
kjohnson@rhkc.com

REFERENCE #:0604249

Rockhill Underwriting Management, LLC  
d/b/a in California RHKC Insurance Services, LLC



# Loss Run Report

Policy Number	D3736101A	Policy Term	11/01/2008 - 11/01/2009
Insured Name	County of Galveston		
Division	W - WESTCHESTER/COML RISK SERV	PAC	EXF - EXCESS FIRE
Master/Subsidiary Producer	277335 - AMWINS BROKERAGE OF TEXAS INC	MCC	0080200 - Property-Exclud Westchest A&E

BCO	Adjuster		Event Date	Made Date	Report Date	Close Date	Reopen Date	State	Desc	Claimant	Status	Gross Paid Loss	Gross Paid Expense	Gross Outstanding	Gross Incurred Loss
	Occurrence ID	Supervisor													
												\$0	\$0	\$0	\$0
Subtotal												\$0	\$0	\$0	







## Loss run report

As of: 8/25/2014

### Policy

Name Insured:	GALVESTON COUNTY		
Policy #:	XP260982	Company name:	COLONY INSURANCE COMPANY
Agent name:	AMWINS BROKERAGE OF TEXAS	Source:	C

### Claims

Policy period: 11/1/2012 - 11/1/2013

No claims

Γ

Web services active

# Loss Run Report

Broker Company Name	Policy Number	Deal Inception Date	Deal Expiration Date	Layer Exposure Type	Claim Status	Our Claim ID	Date Of Loss Date	Claim Summary Description	Outstanding Indemnity Activity	Paid Indemnity Activity	Outstanding Expense Activity	Paid Expense Activity	Incur Activity
---------------------	---------------	---------------------	----------------------	---------------------	--------------	--------------	-------------------	---------------------------	--------------------------------	-------------------------	------------------------------	-----------------------	----------------

Prop - Risks of Direct Physical Loss  
 MAX3XP0011582      11/01/2009      11/01/2010

Total Claim(s) 0

Prop - Risks of Direct Physical Loss  
 MAX3XP0060233      11/01/2012      11/01/2013

Total Claim(s) 0

Total Claim(s) 0

Total:



Loss Run for NHD378961 - County Of Galveston (15 p/o 40 xs 10)

Insured Name: County Of Galveston (15 p/o 40 xs 10) Policy No: NHD378961 0 Term: 11/1/2012 - 11/1/2013 Underwriter: Carroll, Tracy  
Policy Limit: \$15,000,000 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: County Of Galveston 15 p/o 40 xs 10 Policy No: NHD373926 0 Term: 11/1/2011 - 11/1/2012 Underwriter: English, Bob  
Policy Limit: \$15,000,000 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: County Of Galveston Policy No: LHD369317 0 Term: 11/1/2010 - 11/1/2011 Underwriter: English, Bob  
Policy Limit: \$78,241,223 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: County Of Galveston Policy No: LHD364658 0 Term: 11/1/2009 - 11/1/2010 Underwriter: English, Bob  
Policy Limit: \$77,161,222 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: County Of Galveston Policy No: LHD359926 0 Term: 11/1/2008 - 11/1/2009 Underwriter: English, Bob  
Policy Limit: \$74,000,523 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: County Of Galveston Policy No: LHD355027 0 Term: 11/1/2007 - 11/1/2008 Underwriter: English, Bob  
Policy Limit: \$72,309,003 Claim Prof: Smith  
Deductible: \$50,000 - Per Occ Except With Respect To Wind And Hail: X/5 Of Maximum Available Wind Pool Limits For Building And Contents Per Bldg (Wind Pool Limits as scheduled)

Claim No: 7030018723 Status: C Date of Loss: 11/14/2007 Location of Loss: GALVESTON, TX  
Date Reported: 11/29/2007 Loss Description: ACCIDENTAL DISCHARGE OF AN OFFICES WEAPON DMG WATER LINES IN THE BLDG & CAUSED DMG TO WALLS & FLOORING

\*RSUI no longer has access to updated information for any claims that occurred prior to 7/1/2003 and cannot verify that the information contained in this report for claims prior to that date are complete or accurate. There may have been changes in the information shown, new losses may have been reported or losses may have been closed or re-opened. Accurate information for claims with dates of loss prior to 7/1/2003 for this insured can be obtained by contacting Arrowpoint Capital at Losrun.support@arrowpointcap.com.





Loss Run for NHD378961 - County Of Galveston (15 p/o 40 xs 10)

Insured Name: **County Of Galveston** Policy No: K2HD326885 0 Term: 11/1/2002 - 11/1/2003 Underwriter: English, Bob  
Policy Limit: \$134,878,200 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: **County Of Galveston** Policy No: KHD316733 1 Term: 11/1/2001 - 11/1/2002 Underwriter: English, Bob  
Policy Limit: \$132,047,200 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: **County Of Galveston** Policy No: KHD316733 0 Term: 11/1/2000 - 11/1/2001 Underwriter: English, Bob  
Policy Limit: \$129,453,700 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: **County Of Galveston** Policy No: KHD313860 0 Term: 11/1/1999 - 11/1/2000 Underwriter: English, Bob  
Policy Limit: \$128,453,700 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: **County Of Galveston** Policy No: KHD311643 0 Term: 11/1/1998 - 11/1/1999 Underwriter: English, Bob  
Policy Limit: \$129,404,200 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: **County Of Galveston** Policy No: KHD309644 0 Term: 11/1/1997 - 11/1/1998 Underwriter: English, Bob  
Policy Limit: \$128,442,950 Claim Prof: N/a

No claims exist for this policy year.

Insured Name: **County Of Galveston** Policy No: KHD307857 0 Term: 11/1/1996 - 11/1/1997 Underwriter: English, Bob  
Policy Limit: \$36,067,500 Claim Prof: N/a

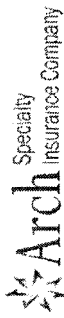
\*RSUI no longer has access to updated information for any claims that occurred prior to 7/1/2003 and cannot verify that the information contained in this report for claims prior to that date are complete or accurate. There may have been changes in the information shown, new losses may have been reported or losses may have been closed or re-opened. Accurate information for claims with dates of loss prior to 7/1/2003 for this insured can be obtained by contacting Arrowpoint Capital at Losrun.support@arrowpointcap.com.



Loss Run for NHD378961 - County Of Galveston (15 p/o 40 xs 10)

No claims exist for this policy year.

	<u>Paid</u>	<u>Reserve</u>	<u>Incurred</u>
Total Gross Incurred	\$0.00	\$0.00	\$0.00
<u>Indemnity</u>	\$9,939.23	\$0.00	\$9,939.23
<u>Expense</u>	\$9,939.23	\$0.00	\$9,939.23
<u>Total</u>	\$9,939.23	\$0.00	\$9,939.23



Insured Name: County of Galveston  
 Policy Number: ESP001102400  
 Policy Period: 11/01/2005 - 11/01/2006

## Advanced Claims Loss Run Report (AC)

Report run by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
Total Claims: 0											
									\$0.00	\$0.00	\$0.00
									\$0.00	\$0.00	\$0.00

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.



Insured Name: County of Galveston / Galveston County Commissioners Court  
 Policy Number: ESP001867400  
 Policy Period: 11/01/2006 - 11/01/2007

**Advanced Claims**  
 Loss Run Report (AC)

Report ran by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
Total Claims: 0												

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.





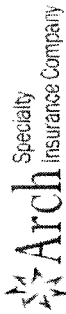
Insured Name: County of Galveston / Galveston County Commissioners Court  
 Policy Number: ESP002366700  
 Policy Period: 11/01/2007 - 11/01/2008

**Advanced Claims**  
**Loss Run Report (AC)**

Report ran by: Bridgel Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
600000526620	Smrek, Jeffry	12/14/08	County of Galveston	Hurricane like like	TX	09/13/08	09/14/08	Hurricane like wind damages to various county facilities	USD	\$0.00	\$0.00	\$0.00
<b>Total Claims: 1</b>										<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.



## Advanced Claims Loss Run Report (AC)

Insured Name: County of Galveston / Galveston County Commissioners Court  
 Policy Number: ESP002356701  
 Policy Period: 11/01/2008 - 11/01/2009

Report run by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
Total Claims: 0												

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.



## Advanced Claims Loss Run Report (AC)

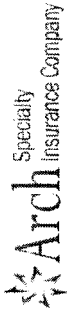
Insured Name: County of Galveston / Galveston County Commissioners Court  
 Policy Number: ESP002356702  
 Policy Period: 11/01/2009 - 11/01/2010

Report ran by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
Total Claims: 0												
										\$0.00	\$0.00	\$0.00
										\$0.00	\$0.00	\$0.00

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.



Insured Name: County of Galveston / Galveston County Commissioners Court  
 Policy Number: ESP002356703  
 Policy Period: 11/01/2010 - 11/01/2011

**Advanced Claims**  
**Loss Run Report (AC)**

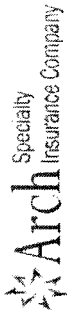
Report run by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
										\$0.00	\$0.00	\$0.00
										\$0.00	\$0.00	\$0.00

Total Claims: 0

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.



Insured Name: County of Galveston / Galveston County Commissioners Court  
 Policy Number: ESP004687400  
 Policy Period: 11/01/2011 - 11/01/2012

**Advanced Claims**  
**Loss Run Report (AC)**

Report ran by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
										\$0.00	\$0.00	\$0.00
										\$0.00	\$0.00	\$0.00
<b>Total Claims: 0</b>												

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.

Aug 22, 2014



Insured Name: County of Galveston  
 Policy Number: ESP004687401  
 Policy Period: 11/01/2012 - 11/01/2013

## Advanced Claims Loss Run Report (AC)

Report ran by: Bridget Little  
 Report run date: Aug 22, 2014 1:14:50 PM

Claim	Handler	Date Closed	Claimant	Additional Insured/ Location	State	Date of Loss	Date Reported	Loss Description	Currency Code	Indemnity Paid	Expense Paid	Medical Paid
Total Claims: 0												
										\$0.00	\$0.00	\$0.00
										\$0.00	\$0.00	\$0.00

The reserves reflected on this loss run represent estimates of exposure and expenses based upon currently available information. Final incurred amounts for these claims may be less than, equal to, or greater than currently posted reserves as investigation and/or litigation continues. No representation is therefore made as to their ultimate accuracy. Arch Insurance Group considers these reserve figures to be proprietary information, that should not be disclosed to third parties without the express written consent of Arch.

FILES LISTED ARE THOSE FILES REPORTED TO ARCH PURSUANT TO THE POLICY. THIS POLICY IS AN EXCESS OR UMBRELLA POLICY AND THIS RUN DOES NOT REFLECT CLAIMS WHICH MAY HAVE BEEN REPORTED BY THE INSURED TO A PRIMARY CARRIER.

# Loss Run Report

Company Name	Policy Number	Deal Inception Date	Deal Expiration Date	Layer Exposure Type	Claim Status	Our Claim ID	Date Of Loss Date	Claim Summary Description	Outstanding Indemnity Activity	Paid Indemnity Activity	Outstanding Expense Activity	Paid Expense Activity	Incur Activity
nt ge nc.	MAX3XP0000472	11/01/2007	11/01/2008	Prop - Risks of Direct Physical Loss	Closed	MXBP01363	09/13/2008	Hurricane damage	\$0	\$0	\$0	\$0	\$0
nt ge nc.	MAX3XP0003187	11/01/2008	11/01/2009	Prop - Risks of Direct Physical Loss					\$0	\$0	\$0	\$0	\$0
	<b>Total Claim(s) 1</b>								\$0	\$0	\$0	\$0	\$0
nt ce	MAX3XP0011582	11/01/2009	11/01/2010	Prop - Risks of Direct Physical Loss					\$0	\$0	\$0	\$0	\$0
	<b>Total Claim(s) 0</b>								\$0	\$0	\$0	\$0	\$0
S an ale ce	MAX3XP0054926	11/01/2011	11/01/2012	Prop - Risks of Direct Physical Loss					\$0	\$0	\$0	\$0	\$0
	<b>Total Claim(s) 0</b>								\$0	\$0	\$0	\$0	\$0
S an ale ce	MAX3XP0060233	11/01/2012	11/01/2013	Prop - Risks of Direct Physical Loss					\$0	\$0	\$0	\$0	\$0
	<b>Total Claim(s) 0</b>								\$0	\$0	\$0	\$0	\$0
	<b>Total Claim(s) 1</b>							<b>Total:</b>	\$0	\$0	\$0	\$0	\$0











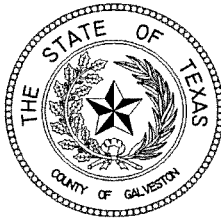
**Policy Loss Report**  
 COUNTY OF GALVESTON AND GALV C  
 MAC 0629680

11/01/2013 to 11/01/2014		1 Claim Count				\$23,203.30	Total for Policy Period	
Policy Period	Claim Number	Loss Date	Report Date	Claimant Name	Loss Description	Claim Status	Total Incurred	Total Incurred Details
11/01/2013 to 11/01/2014	A00036383	04/15/2014	04/15/2014	COUNTY OF GALVESTON AND GALV C	EQUIPMENT BREAKDOWN: SEVERE WINDS YESTERDAY & TODAY/ELECTRICAL MAIN PANEL BURNED	Closed	\$23,203.30	Reserve:+ \$0.00 Loss Paid:+ \$20,954.45 Expense:+ \$2,248.85 Recovery:- \$0.00
<b>1 Total Claim Count</b>							<b>\$23,203.30</b>	<b>Total For Policy</b>

**Loss History**  
For Policy: 207546



<b>Policy ID</b>	<b>Effective Date</b>	<b>Expiration Date</b>	<b>Claim ID</b>	<b>Date of Loss</b>	<b>Claim Status</b>	<b>Amount Paid</b>
20754606	11/1/2001	11/1/2002	No Reported Losses			
20754607	11/1/2002	11/1/2003	No Reported Losses			
20754608	11/1/2003	11/1/2004	No Reported Losses			
20754609	11/1/2004	11/1/2005	No Reported Losses			
20754610	11/1/2005	11/1/2006	No Reported Losses			
20754611	11/1/2006	11/1/2007	No Reported Losses			
20754612	11/1/2007	11/1/2008	C0069367	9/13/2008	Closed	\$7,238,162.52
20754613	11/1/2008	11/1/2009	No Reported Losses			
20754614	11/1/2009	11/1/2010	No Reported Losses			
20754615	11/1/2010	11/1/2011	No Reported Losses			
20754616	11/1/2011	11/1/2012	No Reported Losses			
20754617	11/3/2012	11/3/2012	No Reported Losses			
20754618	11/1/2012	11/1/2013	C0180708	4/3/2013	Closed	\$0.00
20754619	11/1/2013	11/1/2014	C0187914	4/14/2014	Closed	



**County of Galveston**

**ACKNOWLEDGMENT AND CERTIFICATION REGARDING DEBARMENT,  
SUSPENSION, AND OTHER INELGIBILITY**

**Executive Orders 12549 & 12689 Certification, Debarment and Suspension**

Solicitation Number: RFP #B142023

Solicitation Title: Property & Casualty Insurance

**Contractor hereby CERTIFIES that:**

Contractor, and all of its principals, is not presently debarred, suspended, proposed for debarment, proposed for suspension, or declared ineligible under Executive Order 12549 or Executive Order 12689, Debarment and Suspension, and is not in any other way ineligible for participation in Federal or State assistance programs;

Contractor, and all of its principals, were not and have not been debarred, suspended, proposed for debarment, proposed for suspension, or declared ineligible under Executive Order 12549 or Executive Order 12689, Debarment and Suspension, and were not and have not been in any other way ineligible for participation in Federal or State assistance programs at the time its' proposal was submitted in the procurement identified herein and at any time since submission of its' proposal;

Contractor has included, and shall continue to include, this certification in all contracts between itself and any sub-contractors in connection with services performed under this contract; **and**

Contractor shall notify Galveston County in writing immediately, through written notification to the Galveston County Purchasing Agent, if Contractor is not in compliance with Executive Order 12549 or 12689 during the term of its contract with Galveston County.

Contractor **Represents** and **Warrants** that the individual executing this Acknowledgment and Certification on its behalf has the full power and authority to do so and can legally bind the Contractor hereto.

\_\_\_\_\_  
Name of Business

\_\_\_\_\_  
Date

By: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name & Title

State of Texas §  
County of Galveston §

**NON-COLLUSION AFFIDAVIT**

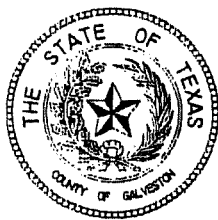
Before me, the undersigned notary, on this day personally appeared \_\_\_\_\_ (Affiant), whom being first duly sworn, deposes and certifies that:

- Affiant is the \_\_\_\_\_ of \_\_\_\_\_, that  
(Individual, Partner, Corporate Officer) (Name of Proposer)  
submitted the attached Proposal in RFP #B142023 Property & Casualty Insurance;
- Affiant is a duly authorized representative of Proposer and is authorized to make this Non-Collusion Affidavit;
- The attached Proposal/Bid is genuine and is not a collusive or sham Proposal/Bid;
- The attached Proposal/Bid has been independently arrived at without collusion with any other bidder, proposer, person, firm, competitor, or potential competitor;
- Bidder/Proposer has not colluded, conspired, connived or agreed, directly or indirectly, with any other bidder, proposer, person, firm, competitor, or potential competitor, to submit a collusive or sham bid or that such other bidder, proposer, person, firm, competitor, or potential competitor shall refrain from bidding/proposing;
- Bidder/Proposer has not in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other bidder, proposer, person, firm, competitor, or potential competitor to fix the price or prices in the attached Bid/Proposal or of the bid/proposal any other bidder/proposer;
- Bidder/Proposer has not in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other bidder, proposer, person, firm, competitor, or potential competitor to fix the overhead, profit or cost element of the Bid/Proposal price or prices of any other bidder/proposer, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against Galveston County or any person interested in the proposed contract;
- Affiant has not in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other bidder, proposer, person, firm, competitor, or potential competitor, paid or agreed to pay any other bidder, proposer, person, firm, competitor, or potential competitor any money or anything of value in return for assistance in procuring or attempting to procure a contract or in return for establishing the price or prices in the attached Bid/Proposal or the bid/proposal of any other Bidder/Proposer; and
- Affiant certifies that Affiant is fully informed regarding the accuracy of the statements contained herein, and under penalties of perjury, certifies and affirms the truth of the statements herein, such penalties being applicable to the Bidder/Proposer as well as to Affiant signing on its behalf.

\_\_\_\_\_  
**Signature of Affiant**

**SWORN TO and SUBSCRIBED** before me this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

\_\_\_\_\_  
Notary Public  
My Commission Expires: \_\_\_\_\_



# County of Galveston Purchasing Department Vendor Qualification Packet

(rev. 1.2, January 27, 2012)

All interested parties seeking consideration for qualified vendor status with the County of Galveston should complete and return only the following attached forms to:

Galveston County Purchasing Department  
722 Moody Avenue, (21st Street), 5<sup>th</sup> Floor  
Galveston, Texas 77550  
(409) 770-5371 office  
(409) 621-7987 fax

- Form PEID:** Person /Entity Information Data  
**Form W-9:** Request for Taxpayer Identification Number and Certification  
*(please note that the included form may not be the latest revised form issued by the Internal Revenue Service. Please check the IRS website at <http://www.irs.gov/pub/irs-pdf/fw9.pdf> for the latest revision of this form.)*  
**Form CIQ:** Conflict of Interest Questionnaire  
*(please note that the included form may not be the latest revised form issued by the State of Texas Ethics Commission. Please check the Texas Ethics Commission website at for the latest revision of this form. Please note that Galveston County Purchasing Agent is not responsible for the filing of this form with the Galveston County Clerk per instructions of the State of Texas Ethics Commission).*

**Certificate(s) of Insurance:** **If the person or entity seeking qualified vendor status with the County will be performing work at or on any County owned facility and/or property, Certificate(s) of Insurance are required to be submitted prior to performing any work.**

Insurance requirements are as follows:

### Public Liability and Property Damage Insurance:

Successful vendor agrees to keep in full force and effect, a policy of public liability and property damage insurance issued by a casualty company authorized to do business in the State of Texas, and in standard form approved by the Board of Insurance Commissioners of the State of Texas, with coverage provisions insuring the public from any loss or damage that may arise to any person or property by reason of services rendered by vendor. Vendor shall at its own expense be required to carry the following minimum insurance coverages:

- For damages arising out of bodily injury to or death of one person in any one occurrence – one hundred thousand and no/100 dollars (\$100,000.00);
- For damages arising out of bodily injury to or death of two or more persons in any one occurrence – three hundred thousand and no/100 dollars (\$300,000.00); and
- For injury to or destruction of property in any one occurrence – one hundred thousand and no/100 dollars (\$100,000.00).

This insurance shall be either on an occurrence basis or on a claims made basis. Provided however, that if the coverage is on a claims made basis, then the vendor shall be required to purchase, at the termination of this agreement, tail coverage for the County for the period of the County's relationship with the vendor under this agreement. Such coverage shall be in the amounts set forth in subparagraphs (1), (2), and (3) above.

**Worker's Compensation Insurance:**

Successful vendor shall also carry in full force Workers' Compensation Insurance policy(ies), if there is more than one employee, for all employees, including but not limited to full time, part time, and emergency employees employed by the vendor. Current insurance certificates certifying that such policies as specified above are in full force and effect shall be furnished by the vendor to the County.

**The County of Galveston shall be named as additional insured on policies listed in subparagraphs above and shall be notified of any changes to the policy(ies) during the contractual period.**

Insurance is to be placed with insurers having a Best rating of no less than A. The vendor shall furnish the County with certificates of insurance and original endorsements affecting coverage required by these insurance clauses. The certificates and endorsements for each insurance policy are to be signed by a person authorized by the insurer to bind coverage on its behalf. The vendor shall be required to submit annual renewals for the term of any contractual agreement, purchase order or term contract, with Galveston County prior to expiration of any policy.

In addition to the remedies stated herein, the County has the right to pursue other remedies permitted by law or in equity.

The County agrees to provide vendor with reasonable and timely notice of any claim, demand, or cause of action made or brought against the County arising out of or related to utilization of the property. Vendor shall have the right to defend any such claim, demand, or cause of action at its sole cost and expense and within its sole and exclusive discretion. The County agrees not to compromise or settle any claim or cause of action arising out of or related to the utilization of the property without the prior written consent of the vendor.

In no event shall the County be liable for any damage to or destruction of any property belonging to the vendor unless specified in writing and agreed upon by both parties.

**Procurement Policy - Special Note:**

Understand that it is, according to Texas Local Government Code, Section 262.011, Purchasing Agents, subsections (d), (e), and (f), the sole responsibility of the Purchasing Agent to supervise all procurement transactions.

Therefore, be advised that all procurement transactions require proper authorization in the form of a Galveston County purchase order from the Purchasing Agent's office prior to commitment to deliver supplies, materials, equipment, including contracts for repair, service, and maintenance agreements. Any commitments made without proper authorization from the Purchasing Agent's office, pending Commissioners' Court approval, may become the sole responsibility of the individual making the commitment including the obligation of payment.

**Code of Ethics - Statement of Purchasing Policy:**

Public employment is a public trust. It is the policy of Galveston County to promote and balance the objective of protecting the County's integrity and the objective of facilitating the recruitment and



retention of personnel needed by Galveston County. Such policy is implemented by prescribing essential standards of ethical conduct without creating unnecessary obstacles to entering public office.

Public employees must discharge their duties impartially so as to assure fair competitive access to governmental procurement by responsible contractors. Moreover, they should conduct themselves in such a manner as to foster public confidence in the integrity of the Galveston County procurement organization.

To achieve the purpose of these instructions, it is essential that those doing business with Galveston County also observe the ethical standards prescribed here.

**General Ethical Standards:** It shall be a breach of ethics to attempt to realize personal gain through public employment with Galveston County by any conduct inconsistent with the proper discharge of the employee's duties.

It shall be a breach of ethics to attempt to influence any public employee of Galveston County to breach the standards of ethical conduct set forth in this code.

It shall be a breach of ethics for any employee of Galveston County to participate directly or indirectly in procurement when the employee knows that:

- The employee or any member of the employee's immediate family has a financial interest pertaining to the procurement.
- A business or organization in which the employee, or any member of the employee's immediate family, has a financial interest pertaining to the procurement.
- Any other person, business or organization with which the employee or any member of the employee's immediate family is negotiating or has an arrangement concerning prospective employment is involved in the procurement.

**Gratuities:** It shall be a breach of ethics to offer, give or agree to give any employee of Galveston County, or for any employee or former employee of Galveston County to solicit, demand, accept or agree to accept from another person, a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation of any part of a program requirement or purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing, or in any other advisory capacity in any program requirement or a contract or subcontract, or to any solicitation or proposal therefore pending before this government.

**Kickbacks:** It shall be a breach of ethics for any payment, gratuity or offer of employment to be made by or on behalf of a subcontractor under a contract to the prime contractor or higher tier subcontractor for any contract for Galveston County, or any person associated therewith, as an inducement for the award of a subcontract or order.

**Contract Clause:** The prohibition against gratuities and kickbacks prescribed above shall be conspicuously set forth in every contract and solicitation by Galveston County.

**Confidential Information:** It shall be a breach of ethics for any employee or former employee of Galveston County to knowingly use confidential information for actual or anticipated personal gain, or for the actual or anticipated gain of any person.

**Questions/Concerns:**

If you have any questions or concerns regarding the information or instructions contained within this packet, please contact any member of the Purchasing Department staff at (409) 770-5371.

## CONFLICT OF INTEREST DISCLOSURE REPORTING

Proposer may be required under Chapter 176 of the Texas Local Government Code to complete and file a conflict of interest questionnaire (CIQ Form). If so, the completed CIQ Form must be filed with the County Clerk of Galveston County, Texas.

If Proposer has an employment or other business relationship with an officer of Galveston County or with a family member of an officer of Galveston County that results in the officer or family member of the officer receiving taxable income that exceeds \$2,500.00 during the preceding 12-month period, then Proposer **MUST** complete a CIQ Form and file the original of the CIQ Form with the County Clerk of Galveston County.

If Proposer has given an officer of Galveston County or a family member of an officer of Galveston County one or more gifts with an aggregate value of more than \$250.00 during the preceding 12-months, then Proposer **MUST** complete a CIQ Form and file the original of the CIQ Form with the County Clerk of Galveston County.

The Galveston County Clerk has offices at the following locations:

Galveston County Clerk  
Galveston County Justice Center, Suite 2001  
600 59<sup>th</sup> Street  
Galveston, Texas 77551

Galveston County Clerk  
North County Annex, 1<sup>st</sup> Floor  
174 Calder Road  
League City, Texas 77573

Again, if Proposer is required to file a CIQ Form, the original completed form is filed with the Galveston County Clerk (not the Purchasing Agent).

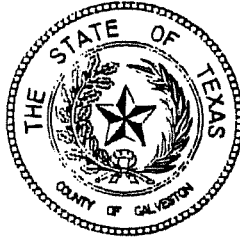
For Proposer's convenience, a blank CIQ Form is enclosed with this proposal. Blank CIQ Forms may also be obtained by visiting the Galveston County Clerk's website and/or the Purchasing Agent's website – both of these web sites are linked to the Galveston County homepage, at <http://www.co.galveston.tx.us>.

As well, blank CIQ Forms may be obtained by visiting the Texas Ethics Commission website, specifically at [http://www.ethics.state.tx.us/whatsnew/conflict\\_forms.htm](http://www.ethics.state.tx.us/whatsnew/conflict_forms.htm).

Chapter 176 specifies deadlines for the filing of CIQ Forms (both initial filings and updated filings).

It is Proposer's sole responsibility to file a true and complete CIQ Form with the Galveston County Clerk if Proposer is required to file by the requirements of Chapter 176. Proposer is advised that it is an offense to fail to comply with the disclosure reporting requirements dictated under Chapter 176 of the Texas Local Government Code.

If you have questions about compliance with Chapter 176, please consult your own legal counsel. Compliance is the individual responsibility of each person, business, and agent who is subject to Chapter 176 of the Texas Local Government Code.



**COUNTY of GALVESTON**  
**Purchasing Department**

rev. 1.3, March 29, 2010

<b>FORM PEID:</b>	<b>Request for Person-Entity Identification Data</b>
-------------------	--

Instructions: Please type or print clearly when completing sections 1 thru 4 and return completed form to:

Galveston County Purchasing Agent  
 722 Moody Avenue (21st. Street), 5th Floor  
 Galveston, Texas 77550  
 (409) 770-5371 office  
 (409) 621-7987 fax

1.

<b>Business Name:</b>	
<b>Attention Line:</b>	

2.

<b>Physical Address:</b>			
<b>City:</b>		<b>State:</b>	<b>Zip+4:</b>

3.

<b>Billing / Remit Address:</b>			
<b>City:</b>		<b>State:</b>	<b>Zip+4</b>

4.

<b>Main Contact Person:</b>	
<b>Main Phone Number:</b>	
<b>Fax Number:</b>	
<b>E-mail Address:</b>	

**Areas below are for County use only.**

<b>Requested By:</b>	<b>Phone / Ext. #</b>
<b>Department:</b>	<b>Date:</b>

<b>Action Requested - Check One:</b>	<b>IFAS PEID Vendor Number:</b>	
<input type="checkbox"/> Add New	<input type="checkbox"/> Change Data	<input type="checkbox"/> Re-activate
<input type="checkbox"/> Inactivate	<input type="checkbox"/> Employee	<input type="checkbox"/> Attorney
<input type="checkbox"/> Landlord	<input type="checkbox"/> Foster Parent	<input type="checkbox"/> Refund
<input type="checkbox"/> One Time	<input type="checkbox"/> Foster Child	

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Exempt payee  <input type="checkbox"/> Other (see instructions) ▶ _____	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b>										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-		-						
	-		-							
<b>Employer identification number</b>										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> </tr> </table>			-							
		-								

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the Instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

#### Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

#### Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

#### Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

#### Specific Instructions

##### Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Partnership, C Corporation, or S Corporation.** Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Disregarded entity.** Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

**Note.** Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

**Limited Liability Company (LLC).** If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

**Exempt Payee**

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

**Part I. Taxpayer Identification Number (TIN)**

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [IRS.gov](http://IRS.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

**Part II. Certification**

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

**Signature requirements.** Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records from Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.** Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 1-877-IDTHEFT (1-877-438-4338).

Visit [IRS.gov](http://IRS.gov) to learn more about identity theft and how to reduce your risk.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor <sup>4</sup>
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

**Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

# CONFLICT OF INTEREST QUESTIONNAIRE

# FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.

A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

## OFFICE USE ONLY

Date Received

1 Name of person who has a business relationship with local governmental entity.

2  Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

3 Name of local government officer with whom filer has employment or business relationship.

\_\_\_\_\_  
Name of Officer

This section (item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?

Yes  No

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?

Yes  No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

Yes  No

D. Describe each employment or business relationship with the local government officer named in this section.

4

\_\_\_\_\_  
Signature of person doing business with the governmental entity

\_\_\_\_\_  
Date