

SECTION I - INSURED INFORMATION

Name of Insured		Effective Date	
Street Address	City	State	County
Insurance Contact		Email Address	
Inspection Contact		Inspection Contact Phone Number	

SECTION II - AGENCY INFORMATION

Agency Name	
Completed by (Name):	

SECTION III - KEY DATES

Bid Meeting / Agency Presentation Date:	
Date Quote is Needed:	

SECTION IV - ATTACHMENTS REQUIRED

Current Budget	<i>Not required for school only accounts</i>
Previous Carrier Currently Valued Loss Runs	<i>If written with TPRS for 3 years or less</i>
Updated Auto Schedule with 17 Digit VIN	<i>Please use expiring schedule provided</i>
Updated Property Schedule	<i>Please use expiring schedule provided</i>
Updated IM Schedule	<i>Please use expiring schedule provided</i>

SECTION V - INDICATE COUNTS BELOW

Employees - Total Employees (all departments)	# Full-time		# Part-time	
School Exposure	Current # of students enrolled			
Water & Sewer Operations	Payroll (excluding clerical)		Users	
Police / Jail Personnel	# Full-time	# Part-time	Reserve/Aux	
Officers with Power of Arrest				
Jailers/Matrons/Detention Guards				
Police Canines or Equines				
School Security - Certified Police Officer				
School Security - Non-Certified				
Crime Coverage Total Employees Handling Money (class A)				

SECTION VI - OPERATIONS INFORMATION

Indicate any new or discontinued operations: