



TEXAS ASSOCIATION of COUNTIES RISK MANAGEMENT POOL

Property Renewal Schedule

Member: Burnet County

Coverage Period: 07/01/2026 - 07/01/2027

Property Renewal Schedule

Member Name: Burnet County

Pool Coordinator: Ms. Cindy Dalrymple

Email: cdalrymple@burnetcountytexas.org

Instructions for Completion

- 1) Review each tab and update as needed.
- 2) Include Declarations page for any National Flood Insurance Program coverage in force.
- 3) Email completed questionnaire by March 31, 2026 to: TACRMP@county.org or sofiam@county.org

All entries are subject to approval, further information may be requested upon review.

If this schedule is not received by March 31, 2026, coverage will be renewed as it currently stands with any requested changes handled by endorsement.

Your Member Services Representative is available to assist you with any questions or concerns and can be reached at 1-800-456-5974.

Property Renewal Questions

Yes or No

1. Do you have any property in the course of construction or plan to undergo any major construction for buildings reported?

If yes, please provide us with the building item #, cost of project and estimated project completion date.

No

2. Are any owned buildings currently vacant?

If yes, please identify the building item # and is the building being maintained and secured?

Yes- Briggs Community Center #1204 is maintained and secured.

3. Are any loss payees applicable to any properties?

If yes, please identify the building item # or mobile equipment item # and provide the loss payee contact information

No

Unreported Claims

Yes or No

1. Are you, or any officer or employee, aware of, or have knowledge of any circumstance, occurrence, fact or event which is likely to be a basis of a claim, either now or in the future?

If yes, please describe:

No

2. Has the situation been reported to TAC Claims Department?

N/A

Acknowledgement and Acceptance

Member Name: Burnet County

Member acknowledges that the information submitted in this questionnaire is true and accurate, including all known potential claims. The information submitted may be used by the Pool in processing the renewal and in assessing the coverage needs of the Member. The questions posed, or any wording of the questionnaire, should not and may not be relied upon by the Member as implying that coverage exists for any particular claim or class of claims. The only coverage provided by the Pool to the Member is as described in the applicable Coverage Document, including any endorsements and the Contribution and Coverage Declaration, issued to a covered Member.

Signature of County Judge or presiding official of the Political Subdivision

Date