



Hidalgo County Purchasing Department  
2812 S. Business Highway 281  
New Administration Building  
Edinburg, Texas 78539  
(956) 318-2626/ Fax: (956) 318-2629

January 13, 2014

South Texas Land Investigations  
C/O Jorge A. Lopez  
3111 West Freddy Gonzalez  
Edinburg, Texas 78539

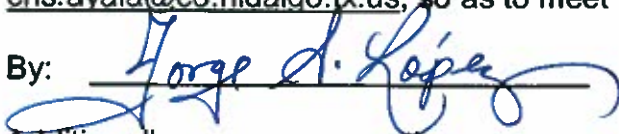
Email: [stxland.lopez@gmail.com](mailto:stxland.lopez@gmail.com)

Re: C-12-013-02-21  
"Title Report Services Pool"

Dear Mr. Lopez:

Hidalgo County Purchasing Department will be requesting Commissioners' Court to consider the last year County's options to exercise an extension as provided in the current lease agreement (under the same rates, terms and conditions). Please acknowledge receipt of this notice of placement on the Commissioners' Court meeting of January 28, 2014 for discussion, consideration and action, by signing below and returning to the Purchasing Department, by no later than, Tuesday, January 21, 2014, via facsimile to (956) 956-292-7612 or email to: [cris.ayala@co.hidalgo.tx.us](mailto:cris.ayala@co.hidalgo.tx.us), so as to meet the agenda request form deadlines.

By:



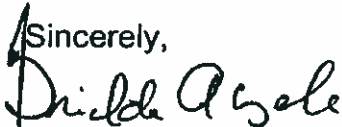
Date:

Jan. 14, 2014

Additionally, we are requesting your company provide an updated certificate of insurance as required through Hidalgo County's Request for (Bid, Quote, Proposal, Statement of Qualification).

Should you have any questions or require additional information, please do not hesitate to contact me at (956) 318-2626. Your cooperation in this matter is greatly appreciated and we hope your company continues its business relationship with Hidalgo County.

Sincerely,



Gricelda (Cris) Ayala, Buyer III  
Hidalgo County Purchasing Department



**POLICY DECLARATIONS**  
**MISCELLANEOUS PROFESSIONAL LIABILITY INSURANCE**  
**POLICY NUMBER: ENO 6000603 13 01**  
**RENEWAL OF POLICY: NEW**

*Named Insured & Mailing Address:*

*Broker Name & Mailing Address:*

**South Texas Land Investigations**  
**3111 W. Freddy Gonzalez Dr.**  
**Edinburg, TX 78539**

**Bass Underwriters - Houston TX**  
**2203 Timberloch Place, Suite 230**  
**The Woodlands, TX 77380**

*Policy Period: From*      **5/17/2013**      *to*      **5/17/2014**      *at* **12:01 A.M. Eastern Time**

**This policy is issued by the insurance company listed above (herein "Company").**

**THIS POLICY IS A CLAIMS MADE AND REPORTED POLICY WHICH COVERS ONLY CLAIMS FIRST MADE AGAINST THE INSURED AND REPORTED TO THE COMPANY DURING THE POLICY PERIOD. PLEASE READ THIS POLICY CAREFULLY.**

**RETROACTIVE DATE**

**5/17/2013**

**LIMITS OF INSURANCE\***

Each Claim  
Aggregate Limit  
*\* Includes Costs of Defense*      **\$1,000,000./\$1,000,000.**

**RETENTION\***

Each & Every Claim      **\$      5,000.00**  
*\*Applies to Costs of Defense*

**PROFESSIONAL SERVICES**

As Per Attached Title and Escrow Services Endorsement

**PREMIUM**

Premium      **\$      3,000.00**

Notices to Insurance Company:	Notice of Claim or Potential Claim: Attn: Claims Department American Safety Claims Services, Inc. 100 Galleria Parkway, Suite 700 Atlanta, GA 30339 <a href="mailto:Claims@amsafety.com">Claims@amsafety.com</a>	All other notices: VP, PL Underwriting Group American Safety Indemnity Company 100 Galleria Parkway, Suite 700 Atlanta, GA 30339 <a href="mailto:PL@amsafety.com">PL@amsafety.com</a>
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**IN CONSIDERATION OF THE PAYMENT OF THE PREMIUMS, AND SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF THIS POLICY, WE AGREE TO PROVIDE THE INSURED WITH THE INSURANCE AS STATED IN THIS POLICY.**

POLICY DECLARATIONS  
MISCELLANEOUS PROFESSIONAL LIABILITY INSURANCE



POLICY NUMBER: ENO 6000603 13 01  
NAMED INSURED: South Texas Land Investigations

THESE DECLARATIONS, TOGETHER WITH THE COMPLETED AND SIGNED APPLICATION FOR THIS POLICY INCLUDING INFORMATION FURNISHED IN CONNECTION THEREWITH, AND THE COVERAGE FORM AND ANY ENDORSEMENTS ATTACHED HERETO, CONSTITUTE THE ABOVE NUMBERED INSURANCE POLICY.

Countersigned: 5/19/2013  
Date

By:   
(Authorized Representative)

In witness whereof, this company has caused this policy to be signed by its President and Secretary but if required by state law, the policy shall not be valid unless countersigned by an authorized representative of the Company.



SECRETARY SIGNATURE



PRESIDENT SIGNATURE

SOUTHERN COUNTY MUTUAL INSURANCE COMPANY  
 5525 LBJ FREEWAY  
 DALLAS, TEXAS 75240  
 (800) 344-2275



079 50 56

**TEXAS PERSONAL AUTO POLICY**

Named Insured and Mailing Address LOPEZ; JORGE LOPEZ; ANITA 1720 DAMASCO AVE EDINBURG, TX 78541	Agency and Mailing Address MARBURGER-HOLT INSURANCE AGENC PO BOX 1198 EDINBURG, TX 78540  956-383-0117
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Policy Number AT 0795056 06	State/Agent 42 0710
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Policy Period	Effective 10/31/2013	Expires 10/31/2014	Effective date of change	12:01 AM Standard Time at the address of the named insured as stated herein
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Special Messages  
**RENEWAL**  
 RENEWAL PREMIUM IS \$1,238

Description of Vehicle	Veh. #	YR	Make/Model	Identification Number	List Price or Cost New	State	Terr	Rating Symbol	Class
	1	04	FORD EXPEDITION	1FMPU17L74LB03098		42	057	14	1B 0 30

Coverages & Premiums Coverage is provided where a premium and a limit of liability are shown for the coverage.

Coverages	Limits		Premiums
	Each Person	Each Accident	VEH 1
<b>A Liability Coverage</b>			
Bodily Injury Liability	\$250,000	\$500,000	410
Property Damage Liability		\$250,000	225
<b>B1 Medical Payments Coverage</b>			
<b>B2 Personal Injury Protection Coverage</b>	\$5,000		111
<b>C Uninsured/Underinsured Motorists Coverage</b>			
Bodily Injury Liability	\$250,000	\$500,000	77
Property Damage Liability		\$250,000	56
(\$250 Deductible applicable to PD Liability)			
<b>D Coverage for Damage to Your Auto</b>			
<b>Other Than Collision</b> VEH 1			
Actual Cash Value			
Unless Otherwise Stated			
Less Deductible      \$500			123
<b>Collision</b>			
Actual Cash Value			
Unless Otherwise Stated			
Less Deductible      \$500			234
<b>Towing and Labor</b> (Per Disablement)			
<b>Rental Reimbursement</b> (Per Day/Maximum)			

Sub Total Premium per Vehicle 1,236

Additional Endorsements  
 Auto Theft Prevention \$2  
 (See Back for Explanation)

**TOTAL POLICY PREMIUM \$1,238**

Issue Date  
 09/17/2013

Named Insured	Policy Number
LOPEZ; JORGE	AT 0795056 06

Loss Payees Any loss under Part D is payable as interest may appear to the named insured and:

Garaging Location The Vehicle(s) described in this policy is principally garaged at the policy mailing address unless otherwise stated.

Driver Information #	Dr	Name	Date of Birth	Sex	Marital Status	Use	Driver License #	Veh. #
1		LOPEZ; JORGE	12/22/1956	M	M	W	08295642	1
2		LOPEZ; ANITA	06/14/1954	F	M		13045172	

Refer to front for Coverage and Limits

Attached Endorsement Form Numbers of Endorsements Attached to Policy at Date of Issue

551	TXPA924
573A	PR2010
TX-PA1	501A
593E	503A
TX-PAQR	

Additional Special Messages YOUR POLICY INCLUDES THE "CONSUMER BILL OF RIGHTS" FOR PERSONAL AUTOMOBILE INSURANCE.

Notice The Automobile Burglary and Theft Prevention Authority fee is payable in addition to the premium due under this policy. This fee reimburses the insurer, as permitted by 28 TAC Sec. 5.205, for the \$2.00 fee per motor vehicle year required to be paid to the Automobile Burglary and Theft Prevention Authority under Texas Civil Statutes, Article 4413(37), Sec. 10, which was effective on June 6, 1991, and revised effective September 1, 2011.

Issue Date	State/Branch/Agent
09/17/2013	42 15 0710
TX-ALPS-A-DEC2-0795	

Named Insured	Policy Number
LOPEZ; JORGE	AT 0795056 06

Credits &  
Surcharges

	VEH 1
ANTI-THEFT CREDIT INCLUDED	4
PASSIVE RESTRAINT CREDIT INCLUDED	B
MATURE OPERATOR DISCOUNT	X
CLAIM FREE (5-6 YEARS) CREDIT APPLIED	

We agree to make available to you an installment payment plan as described in Rule 14 of the Texas Automobile Rules and Rating Manual, except when an installment payment plan is prohibited by other rule or by statute.

Issue Date	State/Branch/Agent
09/17/2013	42 15 0710