

Farmers Auto Regional Central OKC Tier 2

Check Number:

1632294184

Date:

02/21/2022

PAY NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE
NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE

\$3,521.67****

To County of Hidalgo
the 9805 N 10th St
order McAllen, TX, 78504-9529
of

Claimant/Patient: County of Hidalgo
Insured: San Rodriguez
Date of Loss: 11/19/2021
Claim Number: 7003779189-1-5
Check Number: 1632294184
Payment Under Insured's: Property
Correspondence Reference: GF2RLBXM3
Print Date: 02/21/2022 11:01 AM
Requested By: Matthew C Ballard

PLEASE FOLD AND DETACH CHECK ON LINE BELOW

THIS DOCUMENT CONTAINS VOID TEXT THAT WILL APPEAR WHEN PHOTOCOPIED.



62-20/311

Farmers Texas County Mutual Insurance Company
CLAIMS SERVICE CENTER
NATIONAL DOCUMENT CENTER PO BOX 268994
OKLAHOMA CITY OK 73126

Claim Number
7003779189-1

Check No. 1632294184
Date: 02/21/2022

PAY Three Thousand Five Hundred Twenty One Dollars And Sixty Seven Cents \$3,521.67****

NOT GOOD AFTER SIX MONTHS

To County of Hidalgo
the 9805 N 10th St
order McAllen, TX, 78504-9529
of

Citibank N.A. - One Penns Way - New Castle, DE 19720

THE ORIGINAL DOCUMENT HAS A REFLECTIVE WATERMARK ON THE BACK.

HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENT.

⑈ 1632294184 ⑈

⑈ 031100209⑈

⑈ 38724493⑈

01 01 003192 GF2RLBXM3 CB0221P3 04 1 070305



3440 Spur 54 Harlingen, TX 78552 P.O. Box 29 Harlingen, TX 78551

PROPOSAL

SUBMITTED TO			DATE 2/9/2022		
COMPANY NAME Hidalgo County			JOB NAME Fence Repair		
CONTACT NAME Saulo Ramos			STREET 100 Bryan Rd		
STREET 100 North Closser			CITY Mission	STATE Tx	ZIP 78572
CITY Edinburg	STATE Tx	ZIP 78539	PHONE 956-379-2746	BACK-UP PHONE NUMBER	

email address saulo.ramos@co.hidalgo.tx.us

We hereby submit estimate per the following specifications:

Total Height	_____	BUY BOARD#657-21	
Post Spaced	_____	Remove 63' Of 7' + Barbwire chain link fence and 1 - 8' double	
Fence Style	_____	swing gates with drop rod assembly.	
Gauge	_____ <input type="checkbox"/> 9 <input type="checkbox"/> 11	Replace all damaged line post and corner post as well as gate post.	
Knuckled	_____ <input type="checkbox"/>	Dispose of old material	
Safeguard	_____ <input type="checkbox"/>		
Top Rail	_____ O.D.		
Line Post	_____ O.D.	Material & Labor	
End Post	_____ O.D.		SUBTOTAL <u>\$3,521.67</u>
Corner Post	_____ O.D.		
Walk Gate Post	_____ O.D.		
Drive Gate Post	_____ O.D.	Material \$2679.53 - 8% = \$2,465.17	
Gate Frames	_____ O.D.	Labor 16.904hrs x \$62.50 = \$1,056.50	

WOOD FENCE

No. of Feet	_____		
Height	_____		
Wood	_____		
Style	_____		TAX \$0.00
W. Gate	_____		TOTAL \$3,521.67
Dr. Gate	_____		

Tax Exempt? Yes No _____ Offer expires in 5 days. Terms Due upon completion of installation

We hereby propose to furnish labor and materials - complete in accordance with the above specifications, for the sum of:

_____ dollars (\$ **3,521.67**)

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Our workers are fully covered by Workman's Compensation Insurance.

CUSTOMER - PLEASE SIGN PROPOSAL AND RETURN UPON ACCEPTANCE

Accepted as
written by

Authorized Signature

Prepared By

Don Gomez

Estimator - Hurricane Fence Company