

Stephenville Independent School District



transportation directors and supervisors in collecting information at bus/vehicle collisions, determining the root cause factors, preventing reoccurrence, and supporting the district in the case of legal action.

Loss Prevention Coordinator Course

This course is designed to provide loss prevention knowledge and tools to educate professionals who work on risk management or safety issues. The course covers a variety of subjects such as incident investigation, implementing a training program, accident prevention plans, and conducting workplace inspections.

Special Risks and Resources

Risk Management Risk Solutions includes a small team of consultants that focus on special risks. The special risks consultants work in conjunction with the member's risk solutions consultants to provide comprehensive risk management consulting and services.

Emergency Management and School Security Services

The Emergency Management and School Security Program provides members access to training, resources, and support to help them build a quality emergency management and school security program. Some of the services offered include support with planning, drills, exercises, and hazard and risk analysis. Training is also available on emergency operations planning, functional and hazard specific annexes, crisis communication, hazard and risk analysis, and school continuity of operations. When schools are part of the emergency preparedness process, the entire community benefits.

Workers' Compensation

Worker's Compensation members have access to training and resources covering employer responsibilities, First Report of Injury (FROI) reporting, wage statements, modified duty, and other topics.

Emerging Risks

The Fund is committed to providing training and resources to meet members' evolving needs. The Risk Solutions division provides resources, training, and consultation on emerging risks related to data privacy and legal liability to members of those programs.

Online Resources

Other resources available for members include a loss prevention manual, safety training handouts and employee safety handbooks for various workgroups (English and Spanish).



Pricing & Contractual Documents

All coverage quoted is subject to the terms and conditions as stated in the enclosed Contribution and Coverage Summary (CCS), coverage agreement, and Interlocal Participation Agreement (IPA).

The Contribution and Coverage Summary (CCS) may be returned via email to scot.parnell@tasb.org or tasbrmf@tasbrmf.org.

To place your coverage through the Fund, please execute and return the following document:

- Auto, Liability, Property, and Workers' Compensation Contribution & Coverage Summary (CCS)

Coverage under this CCS is contingent upon concurrent participation in the Fund's Auto, Liability, Property, and Workers' Compensation programs.



Stephenville ISD

Contribution & Coverage Summary (CCS)

Coverage under this CCS is contingent upon concurrent participation in the Fund's Auto, Liability, Property, and Workers' Compensation programs.

Participation Period: March 1, 2020 through February 28, 2021

PROPERTY Risk of Direct Physical Loss to Buildings, Personal Property, and Other Structures	Per Occurrence Limit	Deductible	Contribution
All Perils Except Wind, Hurricane, and Hail	Blanket Replacement Cost \$130,250,000	\$10,000	\$257,331
Wind, Hurricane, and Hail		\$250,000	Included
Flood	\$2,000,000	\$50,000	Included
Earthquake	\$2,000,000	\$50,000	Included
Crime	\$100,000	\$10,000	Included
Additional Sublimits and/or Deductibles			
Sublimit for Wind, Hurricane, and Hail Loss to single ply membrane roofs and accompanying roof systems; all other deductibles apply	\$1,000,000	\$250,000	Included
Additional deductible(s) for Wind, Hurricane, and Hail - \$100,000 per building over 25,000 square feet sustaining damage, up to a maximum deductible for the Occurrence of \$1,000,000, inclusive of the Wind, Hurricane, and Hail deductible	\$123,401,611	\$100,000	Included
Equipment Breakdown			
Equipment Breakdown	\$100,000,000	\$10,000	Included

SCHOOL LIABILITY	Per Claim/Occurrence Limit	Deductible	Contribution
Professional Legal Liability Subject to \$1,000,000 Maximum Annual Aggregate	\$1,000,000	\$5,000	\$12,846
General Liability	\$1,000,000	\$0	Included
Employee Benefits Liability	\$100,000	\$0	Included

PRIVACY & INFORMATION SECURITY	Deductible	Contribution
\$100,000 Limit for Privacy Liability \$100,000 Limit for Claim/Event Response Services Notification costs for up to 10,000 individuals	\$0	Included

AUTOMOBILE	Limit	Deductible	Contribution
Automobile Liability \$100,000 per Person Bodily Injury Limits/\$300,000 per Occurrence Bodily Injury Limits/\$100,000 per Occurrence Property Damage Limits	\$100/\$300/\$100	\$1,000	\$14,184
Automobile Physical Damage			\$14,341
Comprehensive	Actual Cash Value	\$1,000	Included
Collision	Actual Cash Value	\$1,000	Included
Ancillary Coverage	Per Occurrence Limit	Deductible	Contribution
School Crisis Coverage	\$250,000	\$0	\$0
TOTAL CONTRIBUTION			\$298,702
<i>This is not an Invoice.</i>			

Conditions

Property

Named/Numbered Windstorm: The term "Named/Numbered Windstorm" is defined as all loss and damage directly caused by, resulting from or arising out of Windstorm as named or numbered by the National Weather Bureau, National Hurricane Center or any recognized meteorological authority, including but not limited to loss or damage caused by wind driven rain, flood, storm surge, wave wash, surface water, overflow of bodies of water, or spray from any of these.

The term "Tier 1" shall mean the Texas Counties of Aransas, Brazoria, Calhoun, Cameron, Chambers, Galveston, Jackson, Jefferson, Kenedy, Kleberg, Matagorda, Nueces, Refugio, San Patricio and Willacy.

The term "Tier 2" shall mean the Texas Counties of Bee, Brooks, Fort Bend, Goliad, Hardin, Hidalgo, Jasper, Jim Wells, Liberty, Live Oak, Newton, Orange, Victoria and Wharton.

The term "Harris County" shall mean the Texas County of Harris.

Location: A single street address where Covered Property is sited.

Flood Zone Exclusions: As to the Flood endorsement, Fund Member properties are excluded from coverage if they are located in certain Special Flood Hazard Areas (SFHA) identified on the Flood Insurance Rate Map. Fund Member property in the following SFHAs are excluded: Zone A, Zone AO, Zone AH, Zones A1-A30, Zone AE, Zone A99, Zone AR, Zone AR/AE, Zone AR/AO, Zone AR/A1-30, Zone AR/A, Zone AR/AH, Zone V, Zone VE, Zone VO, and Zones V1-V30. Fund Members with such properties should seek coverage under the National Flood Insurance Program (NFIP) or other Flood Program.

Other Limits: If more than one Per Occurrence Limit may be applicable, the Fund shall determine which limit will apply.

Statement of Values: Fund Member has provided the Fund with the most current and accurate statement of values for all applicable property, including a complete and accurate listing of vehicles owned by the Fund Member. Fund Member agrees to allow the Fund to conduct property appraisals of the Fund Member's property on a periodic basis and agrees to accept values provided by the Fund.

Salvage: The Fund will have the right, in its sole discretion, to exercise rights of salvage to any damaged property paid for or replaced under the terms of this Agreement.

Claims Reporting: Fund Member will provide to the Fund timely notice of all claims as required in the Interlocal Participation Agreement and the Fund's Coverage Agreement.

Single Ply Membrane: 'Single Ply Membrane' is synthetic roofing material that includes but is not limited to EPDM, TPO, and PVC membranes.

Liability

Prior Acts: Fund Member certifies that all known or reported acts for which it is reasonably believed may result in a legal claim against the Member, have been fully disclosed. Additionally, Fund Member acknowledges that this coverage excludes any claims arising from such known or reported acts. This Agreement does not void coverage afforded to Fund Member under any previous Fund Agreement.

Claims Reporting: Fund Member will provide to the Fund timely notice of all claims as required in the Interlocal Participation Agreement and the Fund's Coverage Agreement.

Automobile

Statement of Values: Fund Member has provided the Fund with the most current and accurate statement of values for all applicable property, including a complete and accurate listing of vehicles owned by the Fund Member. Fund Member agrees to allow the Fund to conduct property appraisals of the Fund Member's property on a periodic basis and agrees to accept values provided by the Fund.

Salvage: The Fund will have the right, in its sole discretion, to exercise rights of salvage to any damaged property paid for or replaced under the terms of this Agreement.

Claims Reporting: Fund Member will provide to the Fund timely notice of all claims as required in the Interlocal Participation Agreement and the Fund's Coverage Agreement

General

Coverage: Coverage terms and limits provided are as set out in this CCS and the Fund's Coverage Agreement for this participation period.

Definitions: Any terms not defined in this CCS will use the definition for that term from the corresponding Fund coverage agreement.

Payment: The Fund Member agrees to pay contributions based on a plan developed by the Fund. All contributions are payable upon receipt of an invoice from the Fund. The Fund shall determine the applicable program for each contribution. Termination under this Agreement of any program shall not affect the remaining programs.

Termination: This CCS may be terminated by either party with termination to be effective on any successive renewal date by giving written notice to the other party no later than 30 days prior to automatic renewal in accordance with Section 4(a) of the Interlocal Participation Agreement. If this CCS is not terminated, the renewal CCS becomes effective on the automatic renewal date and the member shall be bound by the terms of the renewal CCS.

Concurrent Participation: All coverages through this CCS are only effective if the Fund Member concurrently participates in or has agreed in writing to participate in all the following Fund programs: Auto, Liability, Property and Workers' Compensation. The Fund may terminate all coverages immediately if the Fund Member fails to or ceases to concurrently participate in any of these Fund programs. If termination occurs, the total contribution under this CCS shall be considered fully earned, and the Fund Member agrees that no refund of any contribution shall be due. This paragraph's termination provisions shall take precedence over any conflicting termination provisions in the Interlocal Participation Agreement or this CCS.

Program Coordinators

Coordinator:

The Fund Member is required to designate a Program Coordinator (Coordinator) with express authority to represent and bind the Fund Member in all program matters. Below are the current program coordinators as we have listed.

Property - Julie Griffin

Liability - Julie Griffin

Automobile - Julie Griffin

If a Coordinator's name and contact information is not provided above, the current designated Coordinator and contact information will need to be completed below:

Program	Name	Title	Address	Phone	Email
Property					
Liability					
Automobile					

Fund Member Authorization:

I approve this Contribution and Coverage Summary (CCS) and certify that this information is correct. I affirm that I am duly authorized to approve this CCS and that I have read and agree to this CCS and the Interlocal Participation Agreement.

Authorized signature

Date

Printed name

Title



Stephenville ISD

Contribution & Coverage Summary (CCS)

Coverage under this CCS is contingent upon concurrent participation in the Fund's Auto, Liability, Property, and Workers' Compensation programs.

Participation Period: September 1, 2020 through August 31, 2021

WORKERS' COMPENSATION FULLY FUNDED

Estimated Payroll and Contribution - Subject to Audit

Classification	Estimated Payroll	Net Annual Rate	Estimated Contribution
7380 - Bus Drivers	\$437,081	0.015769	\$6,892
7720 - Police Officers	\$0	0.019646	\$0
8810 - Clerical	\$531,477	0.001034	\$550
8868 - Professional	\$17,334,857	0.002792	\$48,399
9101 - All Other	\$1,306,642	0.020680	\$27,021
Totals	\$19,610,057		\$82,862

TOTAL CONTRIBUTION

\$82,862

This is not an Invoice.

Conditions

Workers' Compensation - Fully Funded

Benefit Limits: Workers' Compensation benefits paid to Fund Member's employees under this Agreement will be as defined in the Texas Workers' Compensation Act (the Act). The Fund is responsible for claims payments as reflected in this CCS. This Agreement does not cover the defense of any suit or claim against a Fund Member except a workers' compensation claim by an eligible employee or former employee of Fund Member for the payment of statutory workers' compensation benefits.

Cooperation: Fund Member agrees to use the Fund's contractors for services related to the administration of claims and to follow the Fund's election under Section 504.053 of the Labor Code to direct care through the Political Subdivision Workers' Compensation Alliance.

General

Coverage: Coverage terms and limits provided are as set out in this CCS and the Fund's Coverage Agreement for this participation period.

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Program Coordinators

Coordinator:

The Fund Member is required to designate a Program Coordinator (Coordinator) with express authority to represent and bind the Fund Member in all program matters. Below are the current program coordinators as we have listed.

Workers' Compensation - Contact Information Needed

If a Coordinator's name and contact information is not provided above, the current designated Coordinator and contact information will need to be completed below:

Program	Name	Title	Address	Phone	Email
Workers' Compensation					

Fund Member Authorization:

I approve this Contribution and Coverage Summary (CCS) and certify that this information is correct. I affirm that I am duly authorized to approve this CCS and that I have read and agree to this CCS and the Interlocal Participation Agreement.

Authorized signature

Date

Printed name

Title



Endorsement

Member: Stephenville ISD
Member ID: 072903

Contract No: P072903-2018-1
Coverage Period: 03/01/2019 to 02/29/2020

Endorsement No.: 1
Effective Date: 01/27/2020
Line of Coverage: School Liability Coverage

As requested by the Member, the indicated Contribution and Coverage Summary for the above referenced term is amended as follows:

Coverage Limits are amended as follows:

SCHOOL LIABILITY	Per Claim/Occurrence Limit	Deductible
Professional Legal Liability Subject to \$2,000,000 Maximum Annual Aggregate	\$2,000,000	\$5,000
General Liability	\$2,000,000	\$0
Employee Benefits Liability	\$100,000	\$0

Additional Contribution of \$0

Thank you for your membership in the TASB Risk Management Fund.

Issued: 01/22/2020

Authorized By:



TEXAS RISK POOL CERTIFICATE OF LIABILITY COVERAGE

DATE (MM/DD/YYYY)
01/22/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE RISK POOL BELOW. THIS CERTIFICATE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING RISK POOL, AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL COVERED ENTITY / PERSON, the terms of coverage(s) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the coverage, certain terms of coverage may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Carole Fowler
	PHONE (A/C. No. Ext): 800-482-7276 PHONE (A/C. No. Ext): 512-467-3645
	E-MAIL ADDRESS: Carole.fowler@tasb.org
	PRODUCER CUSTOMER ID:
	RISK POOL AFFORDING COVERAGE
COVERED ENTITY / PERSON Stephenville ISD 2655 W Overhill Dr Stephenville, TX 76401-1971	RISK POOL A: TASB Risk Management Fund
	RISK POOL B:
	RISK POOL C:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE COVERAGES LISTED BELOW HAVE BEEN ISSUED TO THE COVERED ENTITY / PERSON NAMED ABOVE FOR THE COVERAGE PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE COVERAGE DOCUMENTS DESCRIBED HEREIN ARE SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH COVERAGE DOCUMENTS. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF COVERAGE	ADDL INSD	SUBR WVD	EFFECTIVE DATE (MM/DD/YYYY)	EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			03/01/2019	03/01/2020	EACH OCCURRENCE	\$2,000,000
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Each occurrence)	Excluded
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person)	Excluded
	<input checked="" type="checkbox"/> General Liability					PERSONAL & ADV INJURY	Included
						PRODUCTS - COMP/OP AGG	Excluded
						EMPLOYEE BENEFITS LIAB	100,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY						
	<input type="checkbox"/> ANY AUTO						
	<input type="checkbox"/> ALL OWNED AUTOS						
	<input type="checkbox"/> HIRED AUTOS						
	<input type="checkbox"/> SCHEDULED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Each Occurrence Limit increased to \$2,000,000 effective 01/27/2020

CERTIFICATE HOLDER Walgreen's	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED COVERAGES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE PROVISIONS IN THE COVERAGE DOCUMENTS.
	AUTHORIZED REPRESENTATIVE 