

**Insurance Proposal  
Prepared for**

**Ft. Bend Co. Toll Rd. Authority**

**CONTRACTORS EQUIPMENT  
BUSINESS INCOME  
BOILER & MACHINERY**



McDonald & Wessendorff Insurance • 611 Morton • Richmond, Texas 77469  
PH (281) 342-6837 (MUDS) • Fax: (281) 341-6837 (MUDS)



# McDonald & Wessendorff Insurance

## Welcome!

Thank you for choosing us for your insurance needs. Finding the right people for the right job can be difficult, especially when dealing with insurance.

We at McDonald & Wessendorff Insurance are dedicated to "Growing Relationships" with our clients. The following material about this insurance program is designed specifically for you.

Please contact us at 281-342-6837 with any questions, comments or concerns.

## McDonald & Wessendorff Insurance:

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Ft. Bend Co. Toll Rd. Authority

TYPE OF POLICY: CONTRACTORS EQUIPMENT

PROPOSED EFFECTIVE DATE: TBD

COVERAGE: \* Scheduled Contractors Equipment (IM7000 0404)  
\* Contractors Equipment – Income (IM 7027 0404)

VALUATION: ACTUAL CASH VALUE

COINSURANCE: 80%

DEDUCTIBLE: \$100,000 All Other Perils  
Wind/Hail – 2% of the Values at Risk – Subject to \$100,000 min  
\$100,000 Earthquake  
\$100,000 Flood

LIMITS: \$ 9,690,336 Real Property  
\$ 2,500,000 Earthquake  
\$ 2,500,000 Flood (ONLY Zone C & X as defined by FEMA)  
\$ 4,000,000 Business Income/Extra Expense

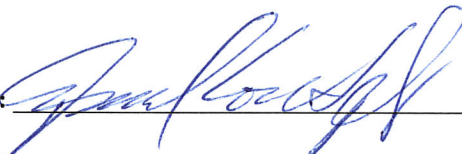
POLICY TERM: One Year

PREMIUM: \$30,119 + \$500 Broker Fee = \$30,619  
*(Broker Fee applies to RT Specialty – not McDonald & Wessendorff)*

COMPANY: Endurance American Insurance Company  
AM Best Rating: A+ XV

ACTUAL QUOTE ATTACHED

TERRORISM CAN BE ADDED FOR ADDITIONAL \$904

ACCEPTED BY:  DATE: 11/20/19

REJECTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

SUBJECT TO POLICY TERMS, CONDITIONS, LIMITATIONS AND EXCLUSIONS



**SOMPO  
INTERNATIONAL**

**New Business Quote**

<b>File Number</b>	600690	<b>Date</b>	October 17, 2019
<b>Insured Name</b>	Ft. Bend County Toll Road Authority	<b>Underwriter</b>	D. Clay Hudson
<b>Insured Address</b>	202 Century Square Blvd, Sugar Land, TX 77478	<b>Effective Date</b>	To be determined
<b>Broker Company</b>	RT Specialty	<b>Expiration Date</b>	12-months after the effective date
<b>Broker Name</b>	Wes Henry	<b>Quote Expiration Date</b>	November 17, 2019

This proposal shows the premiums for the general coverages described, but in no way changes or affects any terms, conditions or exclusions of policies as actually issued. Premiums shown are based on information provided to the company.

**Account #600690**

**Scheduled contractor's equipment and related business income**

**AAIS forms attached**

**Admitted paper: Endurance American Insurance Company**

**\$9,690,336 scheduled equipment as per list on file with Sompo**

**\$4,000,000 business income**

**\$13,690,336 total insured values**

**\$.22 rate**

**\$30,119 premium**

**\$100,000 all other perils deductible**

**2% of the values at risk subject to a \$100,000 minimum for wind and hail deductible**

**5-day (120-hour) BI wait period**

**\$2,500,000 flood sublimit.**

**Flood coverage is provided only in Flood Zones C and X as defined by FEMA**

**\$100,000 flood deductible**

**\$2,500,000 earthquake sublimit**

**\$100,000 earthquake deductible**

**Actual cash value**

**80% coinsurance**

**Premium = \$30,119 + \$500 Broker Fee = \$30,619**

**TRIA (Optional): \$904 + Tax at an additional cost**

**Endurance American Insurance Company – Admitted Paper**

Ft. Bend Co. Toll Rd. Authority

**TYPE OF POLICY:** COMPREHENSIVE BOILER & MACHINERY

**PROPOSED EFFECTIVE DATE:** TBD

**COVERAGE:** •Sudden and Accidental Breakdown of Objects including Pumps, Deep Well Pumps, Motors and Electrical Equipment  
•Mechanical Failure  
•Electrical Surges  
•Production Equipment

**EXCLUSIONS:** Rotating Biological Contactors as Objects on all Waste Water Treatment Plants

**VALUATION:** REPLACEMENT COST

**COINSURANCE:** Waived


**DEDUCTIBLE:** Direct Damage to the following Covered Equipment:  
  
\$25,000 Minimum Wells, in any one occurrence, all submerged equipment:  
  
\$25,000 All Other Boiler & Machinery Equipment, in any one occurrence  
  
Extra Expense: expense caused by direct physical loss or damage to the Covered Equipment shown above:

**LIMITS:** \$ 9,690,336  
\$ 1,000,000 Business Income  
\$ 500,000 Extra Expense

**POLICY TERM:** One Year

**PREMIUM:** \$975

**COMPANY:** Travelers Property Casualty  
AM Best Rating: A++ XV

ACCEPTED BY:  DATE: 11/20/19

REJECTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

*SUBJECT TO POLICY TERMS, CONDITIONS, LIMITATIONS AND EXCLUSIONS*

**FT. BEND CO. TOLL RD. AUTHORITY**

PROPOSED EFFECTIVE DATE: **TBD**

**PREMIUM SUMMARY**

COVERAGE	PREMIUM
CONTRACTORS EQUIPMENT	30,619.00
BOILER & MACHINERY (\$25,000 deductible)	975.00
<b>TOTAL PREMIUM</b>	<b>\$31,594.00</b>

\* \* \* OPTIONAL COVERAGE(S) \* \* \*

OPTIONAL COVERAGE	PREMIUM	ACCEPTED YES/NO
CONTRACTORS EQUIPMENT – ADD TERRORISM	904.00	Yes
BOILER & MACHINERY (\$1,000 deductible)	1,131.00	No
<b>TOTAL PREMIUM FOR ACCEPTED OPTIONAL COVERAGE</b>		

PAYMENT IS DUE WITHIN 30 DAYS OF THE EFFECTIVE DATE TO AVOID CANCELLATION.

ACCEPTED BY: \_\_\_\_\_

PRINTED NAME & TITLE: James D. Condrey, DDS (Board Chairman)

DATE: November 20, 2019

FEDERAL TAX ID #: 57-1159190

WEB ADDRESS IF ANY: www.Abctra.com

**Premiums quoted are valid for 30 days from proposed effective date.**

*All descriptions of proposed coverage's provided herein are intended as an outline of coverage and are necessarily brief. For specific wording concerning insuring agreements, definitions, conditions, terms and exclusions not listed, please read each policy carefully. Please contact our office if there are any questions.*

EFFECTIVE DATE

THIS AGREEMENT IS EFFECTIVE ON THE DATE IT IS APPROVED BY THE FORT BEND COUNTY COMMISSIONERS COURT, AND IF NOT SO APPROVED SHALL BE NULL AND VOID.

DATE OF COMMISSIONERS COURT APPROVAL: \_\_\_\_\_

AGENDA ITEM NO.: \_\_\_\_\_

## FBCTRA Insured Property List

Location	Building Description	Building Scheduled Value	Year Built
Westmoor - Eastbound	Toll Pipe Structure	345,827	2006
Westmoor - Westbound	Toll Pipe Structure	345,827	2006
Westmoor - Eastbound	Toll Equipment, Antennas, Cameras	462,876	2006
Westmoor - Westbound	Toll Equipment, Antennas, Cameras	462,876	2006
Westmoor - Eastbound	Electrical Cabinet & Equipment	223,457	2006
Westmoor - Westbound	Electrical Cabinet & Equipment	106,408	2006
Peek - Eastbound	Toll Pipe Structure	345,827	2006
Peek - Westbound	Toll Pipe Structure	345,827	2006
Peek - Eastbound	Toll Equipment, Antennas, Cameras	462,876	2006
Peek - Westbound	Toll Equipment, Antennas, Cameras	462,876	2006
Peek	Electrical Cabinet & Equipment	106,408	2006
Peek	Electrical Cabinet & Equipment	223,457	2006
Sienna	Toll Gantry, Electrical Cabinets, Equipment, Antennas, Cameras	1,170,490	2004
Fondren	Toll Gantry, Electrical Cabinets, Equipment, Antennas, Cameras	1,141,768	2015
McHard	Toll Gantry, Electrical Cabinets, Equipment, Antennas, Cameras	1,141,768	2015
Lake Olympia	Toll Gantry, Electrical Cabinets, Equipment, Antennas, Cameras	1,141,768	2015
Katy-Gatson	Toll Gantry, Electrical Cabinets, Equipment, Antennas, Cameras	1,200,000	2017



# McDonald & Wessendorff

I N S U R A N C E

As required by Chapter 2270, Government Code, McDonald & Wessendorff Insurance hereby verifies that it does not boycott Israel and will not boycott Israel through the term of the policies included in this proposal. For purposes of this verification, "boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes.

Foreign Terrorists Organizations. Pursuant to Chapter 2252, Texas Government Code, McDonald & Wessendorff Insurance represents and certifies that, at the time of execution of this proposal neither McDonald & Wessendorff Insurance, nor any wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of the same (i) engages in business with Iran, Sudan, or any foreign terrorist organization as described in Chapters 806 or 807 of the Texas Government Code, or Subchapter F of Chapter 2252 of the Texas Government Code, or (ii) is a company listed by the Texas Comptroller of Public Accounts under Sections 806.051, 807.051, or 2252.153 of the Texas Government Code. The term "foreign terrorist organization" in this paragraph has the meaning assigned to such term in Section 2252.151 of the Texas Government Code.

# CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY  
CERTIFICATION OF FILING**

**Certificate Number:**  
2019-563375

**Date Filed:**  
11/20/2019

**Date Acknowledged:**  
11/20/2019

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
McDonald & Wessendorff Insurance  
Richmond, TX United States

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
Ft. Bend Co. Toll Rd. Authority

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**  
11/20/2019  
Property/Boiler Insurance

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	McDonald, Daniel	Richmond, TX United States	X	

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of authorized agent of contracting business entity  
(Declarant)