

AGENDA ITEM # 12

September 16, 1997

Open and consider awarding, rejecting or extending dual bid on hauling based on availability.

James Isbell with Georgetown Transportation stated everyone has worker's compensation and answered questions regarding truck shortage.

Moved: Commissioner Mehevec

Seconded: Commissioner Boatright

Motion: To award annual bid on hauling to Georgetown Transportation.

Vote: Motion carried 4 - 0

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GEORGETOWN TRANSPORTATION, INC.

P.O. Box 1106 • Georgetown, TX 78627-1106

Georgetown (512) 746-4224 • Austin (512) 244-2784 • Houston (713) 631-6700 • Fax (512) 746-5103

September 15, 1997

Williamson County Commissioners Court
County Courthouse
Georgetown, TX 78626


Gentlemen,

Please use this letter as an explanation of the relationship between Georgetown Transportation, Inc., and Odyssey Services, Inc. Odyssey Services is a large employee leasing company headquartered in Euless, Texas. Georgetown Transportation employees are leased to Odyssey Services which provides payroll services, safety experts, and workers compensation insurance for all Georgetown Transportation employees and all drivers under lease to our company.

Regarding workers compensation insurance, Georgetown Transportation is very proud that we have retained workers compensation coverage. As you know, most of our competitors have opted out of this coverage. We believe retaining this coverage is the right thing to do for our employees and our customers. Enclosed, please note the copy of our workers compensation certificate. If there is any additional information we can provide you regarding our insurance coverage, please contact us immediately.

Yours truly,

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James Isbell
Secretary/Treasurer

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)
01/01/1997

PRODUCER

Calvin N. King Insurance Services
204 N. Ector, Suite 300
Euless, Texas 76039THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND
CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE
DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE
POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

INSURED Odyssey Services II, Inc.

204 N. Ector
Euless, TX 76039

Re: Georgetown Transportation, Inc.

COMPANY
LETTER A

CREDIT GENERAL INS. CO. OF TEXAS

COMPANY
LETTER BCOMPANY
LETTER CCOMPANY
LETTER DCOMPANY
LETTER E

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY 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 INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY				GENERAL AGGREGATE \$
	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$
	CLAIMS MADE OCCUR.				PERSONAL & ADV. INJURY \$
	OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE \$
					FIRE DAMAGE (Any one fire) \$
					MED. EXPENSE (Any one person) \$
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				BODILY INJURY (Per person) \$
	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE \$
	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	EXCESS LIABILITY				EACH OCCURRENCE \$
	UMBRELLA FORM				AGGREGATE \$
	OTHER THAN UMBRELLA FORM				
	WORKER'S COMPENSATION				X STATUTORY LIMITS
A	AND	TWC 200-009-04	01/01/97	01/01/98	EACH ACCIDENT \$ 1,000,000
	EMPLOYERS' LIABILITY				DISEASE-POLICY LIMIT \$ 1,000,000
					DISEASE-EACH EMPLOYEE \$ 1,000,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

G250TXH

Williamson County Pct 4

P. O. Box 1104
Taylor, TX 76574

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE
EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO
MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE
LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR
LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Calvin N. King

King 62

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

3/ 8/1997

PRODUCER

Poe & Brown of Texas, Inc.
P. O. Box 926169
Houston, TX 77292-6169
(713) 613-1500 Fax(713) 688-1578

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A SCOTTSDALE INSURANCE CO.
COMPANY LETTER B COLONIAL COUNTY MUTUAL
COMPANY LETTER C
COMPANY LETTER D
COMPANY LETTER E

INSURED

GEORGETOWN TRANSPORTATION, INC
P. O. BOX 1106
GEORGETOWN, TEXAS 78627-1106

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY 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 INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OWNERS & CONTRACTOR'S PROT.	CLS04262585	03/06/97	03/06/98	GENERAL AGGREGATE \$ 2,000,000 PRODUCTS-COMP/OP AGG. \$2,000,000 PERSONAL & ADV. INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 100,000 MED. EXPENSE (Any one person) \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY <input checked="" type="checkbox"/> PHY DAMAGE	CTG0061735	03/06/97	03/06/98	COMBINED SINGLE LIMIT \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS EACH ACCIDENT \$ DISEASE - POLICY LIMIT \$ DISEASE - EACH EMPLOYEE \$
A	OTHER PROPERTY COV \$35,000	CFS087216	05/17/96	05/17/97	BLDG. 35,000 DED. 1,000.

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
FAX 512 9303335

CERTIFICATE HOLDER

WILLIAMSON COUNTY PCT. 4
P. O. BOX 1104
TAYLOR, TEXAS 76574

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

[Signature] 63

AGENDA ITEM # 13

September 16, 1997

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Open and consider awarding, rejecting or extending proposals for property and casualty insurance.

At 10:00 A.M. Judge Doerfler announced time to receive proposals for property and casualty insurance.

At 10:05 AM Judge Doerfler announced time closed to receive proposals for property and casualty insurance.

Proposals were received from:

Texas Association of Counties
The Insurance Store
Evans, Ewan & Brady Insurance Agency, Inc.
Timberline Insurance Services, Inc.
Leibowitz Insurance/Coregis Insurance

Moved: Judge Doerfler

Seconded: Commissioner Heiligenstein

Motion: To note receipt of proposals for property and casualty insurance with award to be made on September 23, 1997.

Vote: Motion carried 4 - 0

AGENDA ITEM # 14

September 16, 1997

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Consider awarding annual bids.

Moved: Commissioner Boatright

Seconded: Judge Doerfler

Motion: To approve awarding annual bids per attached listing.

Vote: Motion carried 4 - 0

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