



TEXAS ASSOCIATION of COUNTIES RISK MANAGEMENT POOL

Property Renewal Schedule

Member: Panola County

Coverage Period: 01/01/2026 - 01/01/2027

Property Renewal Schedule

Member Name: Panola County

Pool Coordinator: Ms. Jennifer M. Stacy

Email: Jstacy@co.panola.tx.us

Instructions for Completion

- 1) Review each tab and update as needed.
- 2) Include Declarations page for any National Flood Insurance Program coverage in force.
- 3) Email completed questionnaire by October 1, 2025 to: TACRMP@county.org or brittanyd@county.org

All entries are subject to approval, further information may be requested upon review.

If this schedule is not received by October 1, 2025, coverage will be renewed as it currently stands with any requested changes handled by endorsement.

Your Member Services Representative is available to assist you with any questions or concerns and can be reached at 1-800-456-5974.

Property Renewal Questions

Yes or No

1. Do you have any property in the course of construction or plan to undergo any major construction for buildings reported?

If yes, please provide us with the building item #, cost of project and estimated project completion date.

No

2. Are any owned buildings currently vacant?

If yes, please identify the building item # and is the building being maintained and secured?

No

3. Are any loss payees applicable to any properties?

If yes, please identify the building item # or mobile equipment item # and provide the loss payee contact information

No

Unreported Claims

Yes or No

1. Are you, or any officer or employee, aware of, or have knowledge of any circumstance, occurrence, fact or event which is likely to be a basis of a claim, either now or in the future?

If yes, please describe:

No

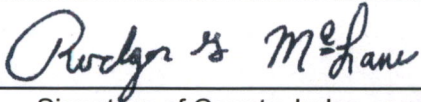
2. Has the situation been reported to TAC Claims Department?

No

Acknowledgement and Acceptance

Member Name: Panola County

Member acknowledges that the information submitted in this questionnaire is true and accurate, including all known potential claims. The information submitted may be used by the Pool in processing the renewal and in assessing the coverage needs of the Member. The questions posed, or any wording of the questionnaire, should not and may not be relied upon by the Member as implying that coverage exists for any particular claim or class of claims. The only coverage provided by the Pool to the Member is as described in the applicable Coverage Document, including any endorsements and the Contribution and Coverage Declaration, issued to a covered Member.



SEP 23 2025

Signature of County Judge or presiding official of the Political Subdivision

Date



TEXAS ASSOCIATION *of* COUNTIES

RISK MANAGEMENT POOL

Liability Renewal Questionnaire

Member: Panola County

Coverage Period: January 1, 2026 through January 1, 2027

Thank you for participating in the TAC Risk Management Pool's Liability program. As we prepare your renewal, there are a few questions we need you to answer so that we can provide you the most comprehensive and cost effective coverage possible. Pursuant to the Interlocal Participation Agreement, Section 4. Annual Contribution, 4.01 requires that the member timely submit to the Pool documentation necessary for the Pool to properly underwrite the renewal. To ensure that we have up-to-date information, please fill out each page completely and make any changes directly to this document. You can also provide supplemental sheets as necessary. NOTE: Omitted information may result in an exclusion from coverage.

The following coverage is eligible for renewal:

- Auto Liability
- Auto Physical Damage
- General Liability
- Privacy or Security Event Liability and Expense Coverage
- Public Officials Liability
- Law Enforcement Liability

Your Vehicle Schedule is attached to this renewal questionnaire. We ask that you review your Vehicle Schedule carefully and report any of the following:

- Sold or totaled vehicles
- Newly purchased or obtained vehicles

We value your membership in the TAC Risk Management Pool and look forward to another successful year! If you have any questions or need help completing the Renewal Questionnaire, please contact your Member Services Representative Brittany Davis at 800-456-5974 or brittanyd@county.org.

Pool Coordinator

Our records indicate that the Member has designated the individual below as the Pool Coordinator for this coverage. In accordance with the terms of the Interlocal Participation Agreement, the Pool Coordinator has express authority to represent and to bind the Member, and the Pool will not be required to contact any other individual regarding matters arising from or related to this Agreement. If the Member wishes to change or update the Pool Coordinator information, please make the necessary changes below.

Pool Coordinator: Jennifer Stacy

Email: jstacy@co.panola.tx.us

Phone Number: (903) 693-0320

Fax Number: (903) 693-2726

Address: 110 S Sycamore, Rm 213-A

City, State, Zip: Carthage TX, 75633

Liability Renewal Questions

1. Please update the total number of budgeted Panola County employees, including elected officials.

	Total	Airport	Hospital	
Full Time Employees:	186	1		Full Time = 35 or more hours per week
Part Time Employees:	9			Part Time = Less than 35 hours per week
Volunteers:	91			Volunteer = Actively serving

Auto Liability

Current Auto Liability Deductible: \$1,000

To make changes to your current Auto Liability coverage, please complete the section below:

Coverage	Currently Included	Add to Coverage	Reject from Coverage	Current Limit	Change Limit	Limit Options
Auto Liability	<input checked="" type="checkbox"/>			\$100,000/\$300,000/\$100,000	<input type="checkbox"/>	<input type="checkbox"/> \$100k/\$300k/\$100k <input type="checkbox"/> \$250k/\$500k/\$250k <input type="checkbox"/> \$1,000,000 <input type="checkbox"/> \$2,000,000
Personal Injury Protection	<input checked="" type="checkbox"/>		<input type="checkbox"/> Reject	\$5,000		
Uninsured / Underinsured Motorist	<input checked="" type="checkbox"/>		<input type="checkbox"/> Reject	\$30,000/\$60,000/\$25,000		

Vehicle Schedule Verification

- ☒ Yes, I have reviewed Panola County's Vehicle Schedule, and made corrections and updates which are incorporated into this Liability Renewal Questionnaire.

Auto Physical Damage

Current Auto Physical Damage Collision Deductible: \$2,500

Current Auto Physical Damage Comprehensive Deductible: \$2,500

General Liability

Current General Liability Deductible: \$0

To make changes to your current General Liability coverage, please complete the section below:

Coverage	Currently Included	Add to Coverage	Reject from Coverage	Current Limit	Change Limit	Limit Options
General Liability	<input checked="" type="checkbox"/>			\$100,000/\$300,000/\$100,000	<input type="checkbox"/>	<input type="checkbox"/> \$100k/\$300k/\$100k <input type="checkbox"/> \$250k/\$500k/\$250k <input type="checkbox"/> \$500,000 <input type="checkbox"/> \$1,000,000 <input type="checkbox"/> \$2,000,000
Unmanned Aircraft		<input type="checkbox"/> Add				

1. How many law enforcement watercrafts under 26 feet, do you own? 2

2. If Unmanned Aircraft is selected, please complete the following for each Unmanned Aircraft:

- U.A.S./ Drone Model and Value _____
- Weight in lbs including all attachments _____
- Year and Serial Number _____
- Description of use _____
- Operator Name _____
- Date of Receipt of FAA COA & Registration Number as applicable _____
- Total U.A.S./Drone flight hours _____
- Description of Training Certifications _____

3. Does your county own an airport? Yes NoIf yes, who operates the airport? Panola County

If the airport is privately operated, the Pool recommends Panola County request a currently dated Certificate of Insurance issued by the airport operator's insurance agent or company that names the County as an Additional Insured and includes the following coverage as applicable:

- General Liability
- Professional Liability (airport facility operations)
- Employment Practices Liability
- Property (if the County owns the building)

Privacy or Security Event Liability and Expense Coverage

Current Privacy or Security Event Liability and Expense Deductible: \$25,000

To make changes to your current Privacy or Security Event Liability and Expense coverage, please complete the section below

Coverage	Currently Included	Add to Coverage	Reject from Coverage	Current Limit	Change Limit	Limit Options
Privacy or Security Event Liability and Expense	<input checked="" type="checkbox"/>			\$1,000,000	<input type="checkbox"/>	<input type="checkbox"/> \$500,000 <input type="checkbox"/> \$1,000,000 <input type="checkbox"/> \$2,000,000
Business Interruption	<input checked="" type="checkbox"/>			\$250,000 / \$250,000	<input type="checkbox"/>	<input type="checkbox"/> \$50,000 / \$50,000 <input type="checkbox"/> \$250,000 / \$250,000 <input type="checkbox"/> \$300,000 / \$300,000 <input type="checkbox"/> \$350,000 / \$350,000 <input type="checkbox"/> \$400,000 / \$400,000 <input type="checkbox"/> \$450,000 / \$450,000 <input type="checkbox"/> \$500,000 / \$500,000
Electronic Equipment and Data Recovery	<input checked="" type="checkbox"/>			\$250,000 / \$250,000	<input type="checkbox"/>	<input type="checkbox"/> \$50,000 / \$50,000 <input type="checkbox"/> \$250,000 / \$250,000 <input type="checkbox"/> \$300,000 / \$300,000 <input type="checkbox"/> \$350,000 / \$350,000 <input type="checkbox"/> \$400,000 / \$400,000 <input type="checkbox"/> \$450,000 / \$450,000 <input type="checkbox"/> \$500,000 / \$500,000
eCrime	<input checked="" type="checkbox"/>			\$250,000 / \$250,000	<input type="checkbox"/>	<input type="checkbox"/> \$25,000 / \$25,000 <input type="checkbox"/> \$250,000 / \$250,000 <input type="checkbox"/> \$300,000 / \$300,000 <input type="checkbox"/> \$350,000 / \$350,000 <input type="checkbox"/> \$400,000 / \$400,000 <input type="checkbox"/> \$450,000 / \$450,000 <input type="checkbox"/> \$500,000 / \$500,000
Extortion	<input checked="" type="checkbox"/>			\$25,000 / \$25,000	<input type="checkbox"/>	<input type="checkbox"/> \$10,000 / \$10,000 <input type="checkbox"/> \$25,000 / \$25,000 <input type="checkbox"/> \$30,000 / \$30,000 <input type="checkbox"/> \$40,000 / \$40,000 <input type="checkbox"/> \$50,000 / \$50,000 <input type="checkbox"/> \$75,000 / \$75,000 <input type="checkbox"/> \$100,000 / \$100,000

Internal Cyber Security Point of Contact:

Name	Barry Tate	Title	IT Coordinator
Telephone	903-261-7864	Email	itadmin@co.panola.tx.us

Please complete all the following questions concerning the Information Technology environment within your organization. These questions are intended to be answered by an IT Director (or equivalent professional) with adequate knowledge of the organization's cybersecurity measures and protocols. All questions require completion for Privacy or Security Event Liability coverage. Increased limits will require underwriting review for consideration.

To be considered for a \$1M Privacy or Security Event Liability and Expense limit the following must be met satisfactorily:

1. Our staff receive mandatory cybersecurity awareness training at least annually on expectations of staff to recognize common cyber-attacks, such as social engineering and phishing, to report possible cybersecurity incidents or other types of cyber-attacks, and to know who to report cybersecurity issues/problems to.
 - a. No, we do not receive mandatory cybersecurity awareness training annually.
 - ☒ b. Yes, we are required to participate in mandatory cybersecurity awareness training at least annually.
2. Our staff logs in to their web-based email using multi-factor authentication (e.g., receiving a text message to validate log in).
 - ☒ a. True
 - b. False
3. Our critical and sensitive data is backed up, stored and encrypted offline on a different logical or physical network such as a cloud backup to support recovery from a catastrophic cyber incident if required.
 - a. True, but our backups are not stored offline on a different logical network location; they are connected to our IT network, and they are encrypted.
 - ☒ b. True, our backups are offline (in a different logical network) and encrypted.
 - c. True, our backups are offline (such as a manual hard drive backup), but they are not encrypted.
 - d. False, we do not back up our critical or sensitive data.

To be considered for a \$2M Privacy or Security Event Liability and Expense limit the following must be met satisfactorily in addition to the questions noted above:

4. My organization/county has formalized IT and cybersecurity policies and plans that document, for example, guidelines for acceptable use of IT, passwords, reporting of unusual activity (e.g., workstation locking up or not functioning properly), cybersecurity training, and cyber incident response.
 - a. We have no documented policies or plans.
 - b. We have some documented policies, procedures, and plans, but there are known gaps.
 - c. We have a robust, well documented IT and cybersecurity program that is current.
5. Our organization/county requires multi-factor authentication for remote access to our network (both cloud-hosted and on-premises, including Virtual Private Networks (VPNs))
 - a. True
 - b. False
6. We review our organizations' IT and cybersecurity policies, procedures, and plans at least annually and we make updates/changes based on changes in the organization, the cybersecurity environment, and technology.
 - a. True
 - b. False
7. In the case of a cybersecurity incident, we report the incident to.
 - a. Cyber Insurance Provider
 - b. Cyber Insurance Provider and Law Enforcement
 - c. Cyber Insurance Provider, Law Enforcement, and Cyber Incident Support Vendors (may include Cyber Forensics, Cyber Legal Support, and other Cyber Incident support)
 - d. None of the Above

8. We have staff (either internal staff or outsourced contractors/vendors) who are responsible for maintaining our IT systems and applying maintenance and cybersecurity patches to software on the workstations within our organization.
 - a. No, we do not have staff/contractors who perform this function.
 - b. Yes, we do have staff/contractors who perform this function.
9. We have cybersecurity tools and systems that monitor who is on our network, when they are on the network, and what network resources they are using.
 - a. True
 - b. False
10. We have implemented email content filtering and web content filtering to identify unauthorized activity, malicious attachments, and other prohibited activity that may negatively impact our IT network and systems.
 - a. True
 - b. False
11. We conduct interactive or simulated social engineering (i.e., KnowBe4 phishing emails) training.
 - a. True
 - b. False
12. We have implemented tools (e.g., Endpoint Detection and Response tools such as Microsoft Defender for endpoints, CrowdStrike Falcon, or Malwarebytes Endpoint Security) to automatically monitor, log, and report unusual and unauthorized activities that occur on our IT workstations.
 - a. True
 - b. False
13. We have software/hardware that is no longer supported by the manufacturer or vendor but is active on our IT network.
 - a. Yes, we have outdated hardware or software on our network that is no longer supported by the manufacturer or vendor.
 - b. No, we do not have any hardware or software on our IT network that is no longer supported by the manufacturer or vendor.
 - c. I do not know.
14. We have a formal Disaster Recovery Plan and a formal Business Continuity Plan that guides us in setting the priority of system (applications / systems / databases) restoration to recover from a cyber incident that impacts our business operations.
 - a. True
 - b. False

Money Transfer Controls

15. Are employees who are responsible for disbursing or transmitting funds provided anti-fraud training, including detection of social engineering, phishing, business email compromise, and other scams, on at least an annual basis?
 - ☒ a. Yes
 - b. No
16. When a vendor or supplier requests any change to its account details (including routing numbers and account numbers), do you confirm requested changes via an out-of-band authentication (a method other than the original means of request)? For example, if a request is made by email, a follow-up phone call is placed to confirm that the supplier or vendor made the request.
 - ☒ a. Yes
 - b. No

Public Officials Liability

Current Public Officials Liability Deductible: \$25,000

To make changes to your current Public Officials coverage, please complete the section below:

Coverage	Currently Included	Add to Coverage	Reject from Coverage	Current Limit	Change Limit	Limit Options
Public Officials Liability	<input checked="" type="checkbox"/>			\$2,000,000	<input type="checkbox"/>	<input type="checkbox"/> \$2,000,000 <input type="checkbox"/> \$3,000,000
District Attorney	<input checked="" type="checkbox"/>		<input type="checkbox"/> Reject			
District Judge	<input checked="" type="checkbox"/>		<input type="checkbox"/> Reject			
Back Wages - Optional Increased Limits (included coverage limit is \$50,000/\$100,000)		<input type="checkbox"/> Add			<input type="checkbox"/>	<input type="checkbox"/> \$50,000/\$100,000 <input type="checkbox"/> \$100,000/\$250,000 <input type="checkbox"/> \$250,000/\$500,000 <input type="checkbox"/> \$500,000/\$1,000,000 <input type="checkbox"/> \$1,000,000/\$1,000,000

Law Enforcement Liability

Current Law Enforcement Liability Deductible: \$10,000

To make changes to your current Law Enforcement Liability coverage, please complete the section below:

Coverage	Currently Included	Add to Coverage	Reject from Coverage	Current Limit	Change Limit	Limit Options
Law Enforcement Liability	<input checked="" type="checkbox"/>			\$2,000,000	<input type="checkbox"/>	<input type="checkbox"/> \$2,000,000 <input type="checkbox"/> \$3,000,000
District Judge	<input checked="" type="checkbox"/>		<input type="checkbox"/> Reject			
District Attorney	<input checked="" type="checkbox"/>		<input type="checkbox"/> Reject			
Unmanned Aircraft		<input type="checkbox"/> Add				

1. Please review the list of law enforcement departments and agencies below and add or delete as appropriate:*Example: Sheriff's Department, Constables' Offices, Detention Facilities*

Panola County Constable's Office
Panola County Employees Of The District Attorney's Office
Panola County Juvenile Probation Department
Panola County Sheriff's Office
Panola County Fire Marshal's Office

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. If Unmanned Aircraft is selected, please complete the following for each Unmanned Aircraft:

- a. U.A.S./ Drone Model and Value _____
- b. Weight in lbs including all attachments _____
- c. Year and Serial Number _____
- d. Description of use _____
- e. Operator Name _____
- f. Date of Receipt of FAA COA & Registration Number as applicable _____
- g. Total U.A.S./Drone flight hours _____
- h. Description of Training Certifications _____

3. Please provide below, the current budgeted number of Law Enforcement personnel for all law enforcement office, department, and agency listed above. If no Juvenile - Class B personnel are reported, coverage will not be provided for these personnel.

NOTE: Full time = 35 or more hours per week. Part Time = Less than 35 hours per week

Actively Engaged			Juvenile			Other			Reserves		
Include: sheriff, deputies, armed investigators, armed bailiffs, constables, jail admins, jailers, other front line personnel			Include: probation officers, detention center guards, boot camp instructors			Include: dispatchers, unarmed prosecutors' investigators, jail nurses, cooks, clerical, unarmed bailiffs, other personnel			Include: all reserve and auxiliary officers and employees		
Class A	Full Time:	64	Class B	Full Time:	2	Class C	Full Time:	20	Class D	Full Time:	26
	Part Time:	3		Part Time:			Part Time:			Part Time:	

4. Does Panola County participate in a Law Enforcement Task Force? Yes ☒ No

If yes, do you lead this Task Force? Yes No

Name of Law Enforcement Task Force: _____

5. Do you participate in a Mutual Aid Agreement? Yes ☒ No

If yes, list name of Mutual Aid Agreement _____

6. Is any law enforcement officer, office, department or agency for which coverage is requested under any criminal or administrative investigation? Yes ☒ No

If yes, provide details or circumstances which are unprivileged public information.

7. Does Panola County own a Jail Facility and/or Detention Facility? ☒ Yes ☐ No

If yes, who operates the Jail Facility? Panola County Sheriff's Department

If yes, who operates the Detention Facility? _____

If the Jail Facility or Detention Facility is privately operated, the Pool recommends Panola County request a currently dated Certificate of Insurance issued by the facility operator's insurance agent or company that names the County as an Additional Insured and includes the following coverage as applicable:

General Liability

Professional Liability

Employment Practices Liability

Property (if the County owns the building)

8. If Panola County operates a Jail Facility and/or Detention Facility, please provide a copy of the Certificate of Compliance from the Texas Commissions of Jail Standards.

9. If a copy of the Certificate of Compliance is not held, attach information on actions being taken to bring facility into compliance. NOTE: Failure to provide Certificate of Compliance from the Texas Commissions of Jail Standards may result in the jail being excluded from coverage.

Unreported Claims

Are you, or any officer or employee, aware of, or have knowledge of any circumstance, occurrence, fact or event which is likely to be a basis of a claim, either now or in the future? Yes ☒ No

If yes, please describe:

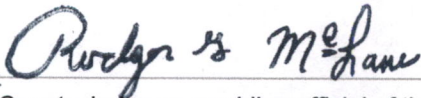
Has the situation been reported to TAC Claims Department? Yes ☒ No

Acknowledgement and Acceptance

Panola County (Member) acknowledges that the information submitted in this questionnaire and Auto Schedule is true and accurate, including all known potential claims. The information submitted may be used by the Pool in processing the renewal and in assessing the coverage needs of Member. The questions posed, or any wording of the questionnaire, should not and may not be relied upon by Member as implying that coverage exists for any particular claim or class of claims. The only coverage provided by the Pool to Member is as described in the applicable Coverage Document, including any endorsements and the Contribution and Coverage Declaration, issued to a covered Member.

Member acknowledges and agrees that vehicles not listed on the attached vehicle schedule, and/or additionally identified by Member as an update to the attached vehicle schedule, will not be provided coverage during the Coverage Period.

If Member makes no changes, the Pool will assume Member is requesting renewal for the same Liability Coverage as in the previous applicable Coverage Period. Member understands that any failure to fully and accurately answer the questionnaire and any attached schedules may result in denial of coverage provided by the Pool. Coverage issued for Public Officials Liability and Law Enforcement Liability will apply on a Claims Made Basis.



Signature of County Judge or presiding official of the Political Subdivision

SEP 23 2025

Date

TEXAS COMMISSION ON JAIL STANDARDS

EXECUTIVE DIRECTOR
Brandon S. Wood



P.O. Box 12985
Austin, Texas 78711
Voice: (512) 463-5505
Fax: (512) 463-3185

Agency Website: <http://www.tcjs.state.tx.us>
E-mail Address: info@tcjs.state.tx.us

January 14, 2025

Sheriff Cutter Clinton
Panola County Sheriff's Office
314 W. Wellington
Carthage, TX 75633

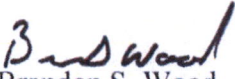
Dear Sheriff Clinton,

The most recent limited compliance review of the Panola County Jail on January 10, 2025, by Texas Commission on Jail Standards Inspector Michael Gravitt has demonstrated that your facility remains in compliance with Texas Minimum Jail Standards.

Enclosed you will find the requirement review of areas that were reviewed for the Panola County Jail.

If you have any questions, please feel free to contact me.

Sincerely,


Brandon S. Wood
Executive Director

BW/cw

cc: Judge Rodger McLane, Panola County

****Note:** Please be advised that one or more areas of technical assistance was provided. The Requirements Review has been attached for your review to ensure that you are fully aware of the issue. Failure to address the technical assistance areas in a timely manner may result in the issuance of a notice of non-compliance.

Judge Bill Stoudt, Longview, Chair
Dr. Esmail Porsa, M.D., Parker, Vice-Chair
Ross Reyes, Melissa

Sheriff Kelly Rowe, Lubbock
Patricia M. Anthony, Garland

Commissioner Ben Perry, Waco
Duane Lock, Southlake
Monica McBride, Alpine

"The Commission on Jail Standards welcomes all suggestions and will promptly respond to all complaints directed against the agency or any facilities under its purview."
To empower local government to provide safe, secure and suitable local jail facilities through proper rules and procedures while promoting innovative programs and ideas