

# General Liability Schedule

## Sanitation Districts



Name of District: \_\_\_\_\_

**\* Total Operating Expenses does not include debt services or capital expenditures**

Code	Description	Unit	Amount
58004	Maximum Bond Issued	Dollars	
58005	Number of Bonds Issued	Total	
58031	Number of Non-EMT Volunteers	Total	
58037	Pipe Line - Under Drain	Miles	
58038	Pipe Line - Drainage	Miles	
58042	Pipe Line - Sewer	Miles	
58097	Additional First Named Members (Subdistricts)	Total	
58098	Additional First Named Members	Total	
58105	Total Operating Expenses - Any Other	Dollars	
58141	Total Operating Expenses - Sanitation	Dollars	
58215	Buildings & Premises occupied by District	Sq. ft.	
58270	Number of Aboveground Storage Tanks (excluding water tanks)	Total	
58348	Number of Board Members	Total	
58350	Number of Permanent Employees - Full-Time	Total	
58351	Number of Permanent Employees - Part-Time	Total	
58366	Total Payroll	Dollars	
58405	Number of Boats over 51'	Total	
58420	Vacant Land	Acres	
58522	Ponds, Lakes & Reservoirs	Total	
58710	Dams - Class 1 - Low Hazard - Total Acre Ft.	Acre Ft.	
58712	Dams - Class 1 - Low Hazard - Number of Dams	Count	
58720	Dams - Class 2 - Med Hazard - Total Acre Ft.	Acre Ft.	
58722	Dams - Class 2 - Med Hazard - Number of Dams	Count	
58730	Dams - Class 3 - High Hazard - Total Acre Ft.	Acre Ft.	
58732	Dams - Class 3 - High Hazard - Number of Dams	Count	

58811	Number of Spillways	Total	
58900	Services Contracted Out to Others	Dollars	
58946	Number of Sewage Taps	Total	
58947	Sewer and/or Sanitation Line Maintenance (budget)	Dollars	
58997	Number of district sponsored Events/Fundraisers - No Alcohol Served	Total	
58998	Number of District sponsored Events/Fundraisers – With Alcohol Served	Total	
58999	Prior Acts Coverage Under a Previous “Claims Made” Policy	Premium	

**If your district has other exposures not common to all similar districts and not listed on the General Liability Schedule, such as: (airplanes, staff security people, bridges, or boats) please list below. Certain activities may require separate coverage under another policy.**

Description	Unit	Amount

**Supplementary Questions:**

1. Any chemical spraying? \_\_\_\_\_
  - a. Purpose of spraying: \_\_\_\_\_
  - b. Chemicals used: \_\_\_\_\_
  
2. Certificates of coverage required for all subcontractors?
  - a. Describe the services contracted: \_\_\_\_\_
  - b. Limit of Liability required (\$1 million recommended): \_\_\_\_\_