

# General Liability Schedule

## Irrigation Districts



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

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

Code	Description	Unit	Amount
56004	Maximum Bond Issued	Dollars	
56005	Number of Bonds Issues	Total	
56031	Number Of Non-EMT Volunteers	Total	
56039	Pipe Line - Water	Miles	
56097	Additional First Named Members (Subdistricts)	Total	
56098	Additional First Named Members	Total	
56105	Total Operating Expenses - Any Other	Dollars	
56140	Total Operating Expenses - Irrigation	Dollars	
56215	Buildings & Premises Occupied by District	Sq. ft.	
56270	Number of Aboveground Storage Tanks (excluding water tanks)	Total	
56348	Number of Board Members	Total	
56350	Number of Permanent Employees - Full-Time	Total	
56351	Number of Permanent Employees - Part-Time	Total	
56366	Total Payroll	Dollars	
56405	Number of Boats over 51'	Total	
56411	Total Water Delivered Annually - Million of Gallons	MGAL	
56420	Vacant Land	Acres	
56522	Number of Ponds, Lakes & Reservoirs	Total	
56539	Miles of Canals/Ditches	Miles	
56710	Dams - Class 1 - Low Hazard - Total Acre-Feet	Acre Ft.	
56712	Dams - Class 1 - Low Hazard - Number of Dams	Count	
56720	Dams - Class 2 - Med Hazard - Total Acre-Feet	Acre Ft.	
56722	Dams - Class 2 - Med Hazard - Number of Dams	Count	
56730	Dams - Class 3 - High Hazard - Total Acre-Feet	Acre Ft.	
56732	Dams - Class 3 - High Hazard - Number of Dams	Count	

56811	Number of Spillways	Total	
56900	Services Contracted Out to Others	Dollars	
56946	Number of Water Mains or Connections	Total	
56997	Number of district sponsored Events/Fundraisers - No Alcohol Served	Total	
56998	Number of District sponsored Events/Fundraisers – With Alcohol Served	Total	
56999	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): \_\_\_\_\_