POLICY GUARANTY FEE REMITTANCE FORM

(Name of Reporting Entit	v)		(Pho	one Number)	
(Address)			(Fax	Number)	
(City, State, and Zip)		_	(e-m	ail address)	
TDI Agency/Direct Operation C Operation License:			as shown	on the Agent/Direc	
☐ Check here if any of the infor	mation abov	e has cha	anged since	your last report.	
	For the Q	uarter:			
Beginning:	, 20	Ending:		, 20	
Owner and Mortgagee Policie	es collected	for:		X \$1.00 = \$	
If you had no closings during received, please enter "0" an			olicy guarant	y fees were	
Total Remittance of Policy Grass Title Insurance Guar	•	•	o: \$		
I,do hereby certify that the above	of				
do hereby certify that the above reflects all owner and mortgagee counted in determining the pu	policies of e quarter	title insura ly polic	ance require y guarant	ed to be reported an y fees due b	
		ame & Po			
SUBSCRIBED AND SWC			E, the under	signed authority, thi	

Notary Public in and for the State of Texas
Printed Name of Notary

REMIT TO:

Texas Title Insurance Guaranty Association c/o Long, Burner, Parks & DeLargy, PC P.O. Box 2212 Austin, Texas 78768-2212

FOR OVERNIGHT DELIVERY:

Texas Title Insurance Guaranty Association c/o Long, Burner, Parks & DeLargy, PC 106 East 6th Street, Suite 300 Austin, Texas 78701

Note: This report and remittance is due as follows:

Calendar Quarter Ending

March 31 June 30 September 30 December 31 Remittance Due Dates

May 1 August 1 November 1 February 1