

2014 TTIGA Guaranty Assessment Recoupment Charge Remittance Form

By: _____
(Name of Reporting Entity) (Phone Number)

(Address) (Firm ID Number)

(City, State, and Zip) (Email Address)

Check here if any of the contact information above or below has changed since your last remittance.
Check here if you are ceasing operations and this is a final disbursement to TTIGA.

For the Quarter:

Beginning: _____, 2014 Ending: _____, 2014

1. Total Owner's and Loan Policies During the Quarter: _____
2. Total Guaranty Assessment Recoupment Charges remitted
(Multiply the amount shown above in No. 1 by \$1.80): = \$ _____

If you had no closings during the quarter and you did not collect any Guaranty Assessment Recoupment Charges, please enter "0" and mail this form.

I, _____ of _____
certify that this information is correct and reflects all owner's and loan policies of title insurance to be reported on my agency's statistical report to TDI.

Signature

Printed Name and Position

Contact Number

SUBSCRIBED AND SWORN TO BEFORE ME, the undersigned authority, this the _____ day of _____, 20____.

Notary Public in and for the State of Texas

Printed Name of Notary

REMIT CHECK MADE PAYABLE TO:
Texas Title Insurance Guaranty Association
[Address]

FOR OVERNIGHT DELIVERY:
Texas Title Insurance Guaranty Association
[Address]

Note: This report and remittance are 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