2018 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: _____, 2018 Ending: _____, 2018

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 $4.50): = $_____

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
P.O. Box 2212
Austin, TX 76768-2212

FOR OVERNIGHT DELIVERY:
Texas Title Insurance Guaranty Association
500 W. 5th St., Suite 1150
Austin, TX 78701

Note: This report and remittance are due as follows:

Calendar Quarter Ending	Remittance Due Dates
March 31	**May 1**
June 30	**August 1**
September 30	**November 1**
December 31	**February 1**