MAILING ADDRESS:
TEXAS REAL ESTATE COMMISSION
P.O. Box 12188
Austin, Texas 78711-2188
www.trec.texas.gov

OFFICE ADDRESS:
TEXAS REAL ESTATE COMMISSION
1700 N. Congress, Suite 400
Austin, Texas 78701
Telephone: (512) 936-3000

MID-YEAR REPORT BY RESIDENTIAL SERVICE COMPANY

GENERAL INFORMATION

The Mid-Year Report is due to the Commission no later than August 1st.

It is important that all requested information is supplied with the Mid-Year Report. Do not leave any blanks. If an item is not applicable, please indicate this on the form.

All documentation submitted in paper or electronic format with the Mid-Year Report must be clearly identified and must be numbered on each page to correspond with the item number to which it refers. Reports with documentation that are not clearly identified will be rejected and returned.

If you elect to submit some or all of the supporting documentation in an electronic format, make sure it is in a standard format and that it is not password protected or compressed. To submit the Mid-Year Report by email, please contact the Commission for further instructions.

Note: The information submitted in connection with this report is generally subject to public disclosure pursuant to Government Code, Chapter 552, the Public Information Act (PIA). However, beginning January 1, 2018, the Commission shall maintain the confidentiality of information provided to the Commission by a residential service company that is claimed by the company to be confidential for competitive purposes. *See* Texas Occupations Code §1303.202(c). PLEASE NOTE: Information provided to the Commission by a publicly traded company or information that is already available in the public domain may not be protected under this confidentiality provision.

PRIVACY NOTICE

In accordance with Chapter 559, Government Code, the following notice about certain information laws and practices is given.

(1) With few exceptions, an individual is entitled on request to be informed about the information that a state governmental body collects about the individual.

(2) Under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information.

(3) Under Section 559.004 of the Government Code, the individual is entitled to have the governmental body correct information about the individual that is incorrect.

Texas Real Estate Commission
P.O. Box 12188
Austin, Texas 78711-2188
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MID-YEAR REPORT BY RESIDENTIAL SERVICE COMPANY

NOTE: ALL INFORMATION MUST BE TYPED OR PRINTED IN INK

GENERAL INFORMATION

1. Period covered by this report: From: January 1, _____ to June 30, _____

2. Company Contact Information ☐ updated information

Name of Company: _____

License Number: _____

Address of Principle Office: _____

_____

Telephone: _____ Fax: _____

Texas Address: _____

_____

Telephone: _____ Fax: _____

Mailing Address: _____

_____

Contact Information for Consumer Complaints Against Company: ☐ updated information

Name : _____

Title: _____

Telephone: _____ Email: _____

Contact Information for Regulatory Compliance: ☐ updated information

Name : _____

Title: _____

Telephone: _____ Email: _____

This document is available on the TREC website at www.trec.texas.gov

CONFIDENTIALITY OF INFORMATION PROVIDED

Beginning January 1, 2018, the Commission shall maintain the confidentiality of information provided to the Commission by a residential service company under this section that is claimed by the company to be confidential for competitive purposes. See Texas Occupations Code §1303.202(c).

PLEASE NOTE: Information provided to the Commission by a publicly traded company or information that is already available in the public domain may not be protected under this confidentiality provision.

Is the information provided in the remainder of this report confidential for competitive purposes? ☐ **Yes** ☐ **No**

If "No", any and all information contained in this report and any attachments thereto will be released upon receipt of a Public Information Request.

3. Has the company transferred any of the risk of loss under contracts written by it in Texas to any insurer, reinsurer, residential service company or other entity during this reporting period?

   If "Yes", provide copies of documentation that demonstrates the policy is current. ☐ Yes ☐ No

4. Has the company, during the reporting period covered by this report, been the subject of any administrative proceedings in any jurisdiction? ☐ Yes ☐ No

   If "Yes", provide an explanation and copies of all orders or other dispositive documents

5. Show payments to real estate brokers, insurance agents, mobile home dealers or non-RSC employees for selling, advertising, inspection or processing of residential service contracts.. (residential service company employees who contact producers should not be in this schedule but included in the income statement under costs of contract expense.)

	Number of contracts	Number of payees
A. Selling	_____	_____
B. Advertising	_____	_____
C. Inspection	_____	_____
D. Processing	_____	_____

Companies that are required to maintain a funded reserve under Subchapter D of the Residential Service Company Act must answer Interrogatories 6-14.

FINANCIAL INFORMATION

6. What is the potential exposure of all active lawsuits? $ _____

   Attach a copy of the pleadings for all lawsuits filed during this reporting period in which the Company has been named as a defendant.

7. List all lawsuits in excess of $10,000 in which the company was named as a defendant which have been disposed of during this reporting period, either by settlement, dismissal or final judgment. State disposition and terms and attach a copy of the final order of the Court.

_____

_____

_____

_____

8. What was the total on the last day of this reporting period of company accounts payable to service contractors who have performed service work in Texas under company service contracts that is 61 or more days past due? $_____

On a separate piece of paper, explain why the amount owed is past due. Give the name and address of the service contractor along with the amount owed and date debt was incurred for each separate item in this category.

9. What was the total of all accounts payable on the last day of this reporting period? $_____

COMPUTATION OF REQUIRED FUNDED RESERVES

NOTE: FOR THE PURPOSES OF ALL CALCULATIONS IN THIS SECTION, CONTRACTS WRITTEN FOR SEPARATE TERMS SHOULD BE CALCULATED SEPARATELY AND THEN COMBINED FOR AN ACCURATE REPORT. COMMISSION STAFF ARE AVAILABLE IN CASE QUESTIONS ARISE.

10. a. Total the number of contract months remaining on contracts in force in Texas on the last day of the reporting period. (For purposes of this calculation, contracts expiring on or before the 15th day of the month should be counted as 0 months for the final contract month. Contracts expiring after the 15th day of the month should be counted as 1 month for the final contract month. Monthly contracts should be counted as 1 month.) Answer:_____

b. Determine the pro rata monthly contract charge. (For purposes of this calculation the aggregate actual contract costs to the consumer are dividedby the aggregate number of months (exclusive of listing period months) in the contract terms of "in force" contracts (see note above)). Answer: $_____

c. Determine the remaining liability on all contracts in force. (Multiply 10a by 10b above). Answer: $_____

d. Calculate 50% of 10c above. Answer: $_____

e. Enter actual Funded Reserve on the last day of the reporting period. Answer: $_____

f. **ALTERNATIVE COMPUTATION**
If 10e is equal to or greater than 10d, no further calculations are needed. If not, filer must demonstrate that a lesser figure will satisfy the statute or be in violation. This is done by totaling the losses of all contracts which expired during the 12 months ending with the last day of the reporting period. This total is divided by the actual gross contract costs of those same expired contracts. (This figure will differ from the aggregate actual contract costs in 10b above in that none of these contracts are still in force.) The quotient of this calculation is now multiplied by 10c above.

Provide the calculation of the funded reserve for each month in this reporting period. Answer: $_____

11. If 10e is not equal to or greater than 10d or 10f above, the residential service company must take immediate steps to come into compliance. Provide evidence that the company has taken steps to come into compliance with the funded reserve requirement. Please refer to §1303.401 of the Residential Service Company Act for methods to come into compliance.

12. Furnish schedules for the Funded Reserve. Give details concerning the company's funded reserve account(s) for future service calls, both nationwide and for Texas, if maintained separately. Show the balance in each account on the last day of the preceding six months. (Copies of bank or investment house statements are preferred here.)

13. Provide information of sales and service call activity sufficient to complete the chart on page 5.

Statement as of June 30 , _____ (Year) of _____ (Name of residential service company)

Current Reporting Period	Paid Service Contract Fees Collected During Month		Service Calls Reported to and Paid for by the Company		Dollar Cost of Service Calls Paid for During Month		Average Dollar Cost per Paid Claim	
	Nationwide	Texas	Nationwide	Texas	Nationwide	Texas	Nationwide	Texas
January								
February								
March								
April								
May								
June								
Totals								

Current Reporting Period	Paid Service Contract Fees Beginning of Month		Paid Service Contracts Issued During Month		Paid Service Contracts Expired, Terminated, or Cancelled During Month		Paid Service Contracts in Force at End of Month	
	Nationwide	Texas	Nationwide	Texas	Nationwide	Texas	Nationwide	Texas
January								
February								
March								
April								
May								
June								
Totals								

CERTIFICATION

I certify that all information reflected in or attached to this report is true and correct to the best of my knowledge.
(Certification must be provided by principal officer of corporation, manager of LLC or by each partner or member of partnership or association.)

Printed Name _____

Title: _____

_____
Signed

Attest: _____

Title: _____

STATE OF _____

COUNTY OF _____

Before me, the undersigned authority, personally appeared: _____ known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

WITNESS MY HAND AND SEAL OF OFFICE, this the ___day of _____

_____
Notary Public in and for

_____County, _____