



3650 S. Boulevard • Edmond, OK 73013 • omag.org
405.657.1400 • 800.234.9461 • FAX 405.657.1401

AGGREGATE DEDUCTIBLE PLAN

2019-2020 Renewal Participation Agreement for CITY OF COWETA

The premium for participation in the *OMAG Workers' Compensation Plan* for the period July 1, 2019 through July 1, 2020 and the Aggregate Deductible for this same period as stated on the Invoice is accepted as an amendment to our original agreement with OMAG for continued participation in the Workers' Compensation Plan.

A. INTEREST CREDIT----- \$

(If any, has been applied to the escrow amount below.)

B. ESCROW ----- \$ **197,091.73**

(Select and initial the appropriate box below and fill in the dollar amount to be applied to premium, if one appears.)

- 1. We will use \$87,031 of our Escrow Credit to reduce our 2019-2020 premium for renewal of participation **(NOTE: COPY OF MINUTES REQUIRED)**, OR
- 2. We will not use any of our Escrow Credit to reduce our 2019-2020 premium for renewal of participation.

Premium shall be due and payable on or before the first day of the agreement period or within thirty (30) days of the date of invoice, whichever is later. OMAG offers three payment plans: annual, semi-annual and quarterly. Payment is due and payable on or before the installment date or within (30) days of the date of the installment invoice, whichever is later. However, interest shall be paid at the rate of ten percent (10%) on the amount of the unpaid balance after the final payment due date.

Failure to pay or for OMAG to receive the premium due on the above stated dates shall result in cancellation and non-coverage for you for the period in which the premium was due, or any extension thereof as a result of your decision to make the installment payments.

8/5/2019
Date

Signature of Authorized Representative

Evette Morris, Mayor
Printed Name and Title

NOTE : THIS AGREEMENT MUST BE SIGNED AND RETURNED TO OMAG BY JUNE 15, TO RENEW JULY 1ST.

(Mail this Agreement, with or without the payment, to OMAG by June 15 at address shown below.)
If payment is mailed after June 15, it must be received at OMAG by July 1st.



AGGREGATE DEDUCTIBLE PLAN INVOICE

Mail Payment to:

OMAG
3650 S. Boulevard
Edmond, Ok 73013-5581

TO: MR. ROGER C. KOLMAN
CITY OF COWETA
P.O. BOX 850
COWETA OK 74429-0850

June 2, 2019

Premium for the Participation in the OMAG Workers'
Compensation Plan for the period of
July 1, 2019 to July 1, 2020

\$191,372.00

AMOUNT DUE

\$191,372.00

This Payment is due by July 1, 2019

Mail payment to address shown above.

NOTE: Unless a due date is stated above, this invoice is due and payable on or before the first day of the agreement period.

OMAG is an Interlocal Cooperation Act Agency of Cities and Towns Providing:
Municipal Liability Protection Plan - Municipal Property Plan - Workers' Compensation Plan



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Workers' Compensation Classification Codes

MEMBER: CITY OF COWETA

07/01/2019 To 07/01/2020 Payroll Period

Class Code	DESCRIPTION	Payroll	Employees	Volunteers
5611	Street or Road	176,253	7	0
7520	Waterworks Oper	339,938	12	0
7580	Sewage Disposal	30,411	2	0
7710	Firefighters &	1,178,657	21	0
7711A	Firefighters, C	10,244	0	4
7720	Police Officers	968,720	24	0
8391	Automobile Repa	42,934	1	0
8810	Clerical Office	1,074,516	26	0
8831	Animal Control	39,435	2	0
9220	Cemetery Operat	40,213	1	0
9403	Trash, Garbage	176,281	7	0
9410	Municipal or To	27,528	6	0
Grand Total		4,105,130	109.0	4.0