



VFIS of Arizona  
 PO Box 75218  
 Phoenix AZ 85087

Bill To: Bowie Fire District  
 PO BOX 241  
 BOWIE AZ 85605

Invoice: 002606  
 Invoice Date: 5/12/2025  
 Due Date: 5/27/2025

Attn: Beth DeSpain

Insured Name:	Bowie Fire District	Policy Number:	VFNU-TR-0004952-05
Coverage:	CPKGE	Policy Term:	3/13/2025 - 3/13/2026
Billing Effective Date:	4/21/2025	Insurance Company:	NATIONAL UNION FIRE INS CO OF PITTS

Type	Description	Amount
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Premium	add 2016 Freightliner	\$935.00
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Total \$935.00

Paid: \$428.00

Memo:

Balance Due: \$507.00

THE RED THERMO-SECURED "SP" LOGO IN THE LOWER CORNER OF THIS CHECK MUST FADE TEMPORARILY WHEN WARMED BY TOUCH OR FRICTION. SEE BACK FOR ADDITIONAL FEATURES.

**BOWIE FIRE DISTRICT/WARRANT**  
 P.O. BOX 241  
 BOWIE, AZ 85605

DATE 19th, May 2025 01301175 66-156/531

PAY TO THE ORDER OF VFIS of Arizona \$ 507.00 DOLLARS

Five hundred - seven and NO/100

Beth DeSpain  
mat mat

WELLS FARGO Wells Fargo Bank, N.A. Chapel Hill, NC

MEMO Inv 002606 Insurance

01301175



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 PO Box 75218  
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Coverage:	CPKGE	Policy Term:	3/13/2025 - 3/13/2026
Billing Effective Date:	4/21/2025	Insurance Company:	NATIONAL UNION FIRE INS CO OF PITTS

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		507.00

Premium	add 2016 Freightliner	\$935.00
---------	-----------------------	----------

Total	\$935.00
Paid:	\$428.00
Balance Due:	\$507.00

Memo:

*Pd 5/19/2025  
 CR #  
 1175*

**Policy Number**  
**VFNU-TR-0004952-05/001**

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.** Policy Period: From 03-13-2025  
To 03-13-2026

**COMMON POLICY CHANGE ENDORSEMENT**

Named Insured BOWIE FIRE DISTRICT

Effective Date: 03-19-25  
12:01 A.M., Standard Time

Agency Name VFIS

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

**COVERAGE PART INFORMATION - Coverage parts affected by this change as indicated by  below.**

- Property
- Crime
- Portable Equipment
- Auto -\$428.00
- General Liability
- Management Liability

The following item(s):

- |  |   |
|--|---|
| <input type="checkbox"/> Insured's Name                        | <input type="checkbox"/> Insured's Mailing Address                  |
| <input type="checkbox"/> Policy Number                         | <input type="checkbox"/> Company                                    |
| <input type="checkbox"/> Effective/Expiration Date             | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan                          | <input type="checkbox"/> Premium Determination                      |
| <input type="checkbox"/> Additional Interested Parties         | <input type="checkbox"/> Coverage Forms and Endorsements            |
| <input type="checkbox"/> Limits/Exposures                      | <input type="checkbox"/> Deductibles                                |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes                 |
| <input type="checkbox"/> Rates                                 | <input type="checkbox"/> Underlying Exposure/Insurance              |

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN DELETED:  
0001 - AZ 1996 FREIGHTLINER PUMPER TANKER VIN#  
1FUWHJBB0TL704539

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

**This premium does not include taxes and surcharges.**


<input type="checkbox"/> No changes	<input type="checkbox"/> To be Adjusted at Audit	Additional	Return -\$428.00
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**Tax and Surcharge Changes**

For New York, Tax and Surcharges do not apply.  
For New York, the NY Motor Vehicle Law Enforcement Fee and/ or NY Fire Fee may be included.

Additional	Return
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Countersigned By:

  
 \_\_\_\_\_  
 AUTHORIZED AGENT

Policy Number  
VFNU-TR-0004952-05/001

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured BOWIE FIRE DISTRICT

Effective Date: 03-19-25  
12:01 A.M., Standard Time

Agency Name VFIS

Loss Payee  
FIRST GOVERNMENT LEASE CO  
PO BOX 8331  
NORTHFIELD, IL 600938331  
DESCRIPTION APPLIES TO VEHICLE # 6

**Policy Number**  
**VFNU-TR-0004952-05/001**

**SCHEDULE OF NAMED INSURED(S)**

Named Insured BOWIE FIRE DISTRICT

Effective Date: 03-19-25  
12:01 A.M., Standard Time

Agency Name VFIS

BOWIE FIRE AUXILIARY, INC

BOWIE FIRE AUXILIARY, INC

## COMMON POLICY CONDITIONS

All Coverage Parts included in this policy are subject to the following conditions.

### A. Cancellation

1. The first Named Insured shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.
2. We may cancel this policy by mailing or delivering to the first Named Insured written notice of cancellation at least:
  - a. 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or
  - b. 30 days before the effective date of cancellation if we cancel for any other reason.
3. We will mail or deliver our notice to the first Named Insured's last mailing address known to us.
4. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.
5. If this policy is cancelled, we will send the first Named Insured any premium refund due. If we cancel, the refund will be pro rata. If the first Named Insured cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.
6. If notice is mailed, proof of mailing will be sufficient proof of notice.

### B. Changes

This policy contains all the agreements between you and us concerning the insurance afforded. The first Named Insured shown in the Declarations is authorized to make changes in the terms of this policy with our consent. This policy's terms can be amended or waived only by endorsement issued by us and made a part of this policy.

### C. Examination Of Your Books And Records

We may examine and audit your books and records as they relate to this policy at any time during the policy period and up to three years afterward.

### D. Inspections And Surveys

1. We have the right to:
  - a. Make inspections and surveys at any time;

- b. Give you reports on the conditions we find; and
- c. Recommend changes.

2. We are not obligated to make any inspections, surveys, reports or recommendations and any such actions we do undertake relate only to insurability and the premiums to be charged. We do not make safety inspections. We do not undertake to perform the duty of any person or organization to provide for the health or safety of workers or the public. And we do not warrant that conditions:
  - a. Are safe or healthful; or
  - b. Comply with laws, regulations, codes or standards.

3. Paragraphs 1. and 2. of this condition apply not only to us, but also to any rating, advisory, rate service or similar organization which makes insurance inspections, surveys, reports or recommendations.

4. Paragraph 2. of this condition does not apply to any inspections, surveys, reports or recommendations we may make relative to certification, under state or municipal statutes, ordinances or regulations, of boilers, pressure vessels or elevators.

### E. Premiums

The first Named Insured shown in the Declarations:

1. Is responsible for the payment of all premiums; and
2. Will be the payee for any return premiums we pay.

### F. Transfer Of Your Rights And Duties Under This Policy

Your rights and duties under this policy may not be transferred without our written consent except in the case of death of an individual named insured.

If you die, your rights and duties will be transferred to your legal representative but only while acting within the scope of duties as your legal representative. Until your legal representative is appointed, anyone having proper temporary custody of your property will have your rights and duties but only with respect to that property.

Named Insured:  
BOWIE FIRE DISTRICT

Policy Number: VFNU-TR-0004952-05/001  
Policy Period: From 03-13-2025  
To 03-13-2026

**SCHEDULE OF AUTO CHANGES**

Vehicle #: 1 Insured's #: T91  
Vehicle Is: DELETED Insured Entity:

Year: 1996  
Make: FREIGHTLINER  
Model: PUMPER TANKER  
V.I.N.: 1FUWHJBB0TL704539  
Valuation: Agreed Value

Use:  
Class Code: 790900  
State: AZ  
Territory: 130

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-137.00 R/P
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-2.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)	\$ 1,000,000		-21.00 R/P
Underinsured Motorists (UIM)	\$ 1,000,000		-142.00 R/P
Physical Damage - Comprehensive	\$ 23,000	\$ 500	-54.00 R/P
Physical Damage - Specified Causes of Loss			
Physical Damage - Collision	\$ 23,000	\$ 500	-72.00 R/P
Physical Damage - Towing and Labor			
Other Auto Coverages			
Total:			-428.00 R/P

Vehicle #: Insured's #:  
Vehicle Is: Insured Entity:

Year:  
Make:  
Model:  
V.I.N.:  
Valuation:

Use:  
Class Code:  
State:  
Territory:

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)			
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments			
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage - Comprehensive			
Physical Damage - Specified Causes of Loss			
Physical Damage - Collision			
Physical Damage - Towing and Labor			
Other Auto Coverages			
Total:			



VFIS of Arizona  
PO Box 75218  
Phoenix AZ 85087

Bill To: Bowie Fire District  
PO BOX 241  
BOWIE AZ 85605

Invoice: 002607  
Invoice Date: 5/12/2025  
Due Date: 5/12/2025

Attn: Beth DeSpain

Insured Name:	Bowie Fire District	Policy Number:	VFNU-TR-0004952-05
Coverage:	CPKGE	Policy Term:	3/13/2025 - 3/13/2026
Billing Effective Date:	3/19/2025	Insurance Company:	NATIONAL UNION FIRE INS CO OF PITTS

Type	Description	Amount
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Premium	delete 1996 Freightliner	(\$428.00)
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Total	(\$428.00)
Paid:	(\$428.00)

Memo:

Balance Due:	\$0.00
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**Policy Number**  
**VFNU-TR-0004952-05/002**

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.** Policy Period: From 03-13-2025  
To 03-13-2026

**COMMON POLICY CHANGE ENDORSEMENT**

Named Insured BOWIE FIRE DISTRICT

Effective Date: 04-21-25  
12:01 A.M., Standard Time

Agency Name VFIS

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

**COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by  below.**

- Property
- Crime
- Portable Equipment
- Auto \$935.00
- General Liability
- Management Liability

The following item(s):

- |  |   |
|--|---|
| <input type="checkbox"/> Insured's Name                        | <input type="checkbox"/> Insured's Mailing Address                  |
| <input type="checkbox"/> Policy Number                         | <input type="checkbox"/> Company                                    |
| <input type="checkbox"/> Effective/Expiration Date             | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan                          | <input type="checkbox"/> Premium Determination                      |
| <input type="checkbox"/> Additional Interested Parties         | <input type="checkbox"/> Coverage Forms and Endorsements            |
| <input type="checkbox"/> Limits/Exposures                      | <input type="checkbox"/> Deductibles                                |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes                 |
| <input type="checkbox"/> Rates                                 | <input type="checkbox"/> Underlying Exposure/Insurance              |

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN ADDED:  
0007 - AZ 2016 FREIGHTLINER TANKER VIN# 3ALHCYCY6GDHC6928  
WITH AN AGREED VALUE OF \$115,000

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

**This premium does not include taxes and surcharges.**

<input type="checkbox"/> No changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$935.00	Return
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**Tax and Surcharge Changes**

For New York, Tax and Surcharges do not apply.  
For New York, the NY Motor Vehicle Law Enforcement Fee and/ or NY Fire Fee may be included.

Additional	Return
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Countersigned By:

  
AUTHORIZED AGENT

Policy Number  
VFNU-TR-0004952-05/002

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured BOWIE FIRE DISTRICT

Effective Date: 04-21-25

12:01 A.M., Standard Time

Agency Name VFIS

Loss Payee  
FIRST GOVERNMENT LEASE CO  
PO BOX 8331  
NORTHFIELD, IL 600938331  
DESCRIPTION APPLIES TO VEHICLE # 6

**Policy Number**  
**VFNU-TR-0004952-05/002**

**SCHEDULE OF NAMED INSURED(S)**

Named Insured BOWIE FIRE DISTRICT

Effective Date: 04-21-25  
12:01 A.M., Standard Time

Agency Name VFIS

BOWIE FIRE AUXILIARY, INC

BOWIE FIRE AUXILIARY, INC

Named Insured:  
BOWIE FIRE DISTRICT

Policy Number: VFNU-TR-0004952-05/002  
Policy Period: From 03-13-2025  
To 03-13-2026

**SCHEDULE OF AUTO CHANGES**

Vehicle # [REDACTED] Insured's #:  
Vehicle Is ADDED: [REDACTED] Insured Entity:

Year: 2016  
Make: FREIGHTLINER  
Model: TANKER  
V.I.N.: 3ALHCYCY6GDHC6928  
Valuation: Agreed Value

Use:  
Class Code: 790900  
State: AZ  
Territory: 130

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		124.00 A/P
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		2.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)	\$ 1,000,000		19.00 A/P
Underinsured Motorists (UIM)	\$ 1,000,000		129.00 A/P
Physical Damage - Comprehensive	\$ 115,000	\$ 500	181.00 A/P
Physical Damage - Specified Causes of Loss			
Physical Damage - Collision	\$ 115,000	\$ 500	480.00 A/P
Physical Damage - Towing and Labor			
Other Auto Coverages			
<b>Total:</b>			<b>935.00 A/P</b>

Vehicle # [REDACTED] Insured's #:  
Vehicle Is: [REDACTED] Insured Entity:

Year:  
Make:  
Model:  
V.I.N.:  
Valuation:

Use:  
Class Code:  
State:  
Territory:

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)			
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments			
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage - Comprehensive			
Physical Damage - Specified Causes of Loss			
Physical Damage - Collision			
Physical Damage - Towing and Labor			
Other Auto Coverages			
<b>Total:</b>			