BOARD OF TRUSTEES OF THE YELLOWSTONE ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH
CONFERENCE-WIDE INSURANCE PROGRAM

Request for Reduced Property Valuation

Name of Congregation: _____

Address of Insured Property: _____

_____

District: _____

With the approval of the Yellowstone Conference Board of Trustees and the District Superintendent, our congregation acknowledges the property described above, including any and all other properties owned, **will be insured at less than replacement cost.**

We acknowledge that by requesting and receiving a reduced value of property coverage, we accept responsibility for the amount of insurance desired for the church property. We further acknowledge that in the event of a property loss to owned property(ies) in excess of the insured value, we would not rebuild the structure to match what currently exists.

Further, we acknowledge that the underwriting insurance company for the Yellowstone Conference-wide Insurance Program, our congregation's district office, the Yellowstone Annual Conference, and/or any of its agencies will not provide financial assistance to cover the amount of a loss and/or property replacement above the lowered insured value.

Rationale for requesting reduced property valuation: _____

_____

_____

Insured Value of Property $_____ 100% Replacement Cost $_____

Requested Reduced Value:

□ 90% Value: $_____ (Blanket) □ 80% Value: $_____(NO Blanket)

Request for Valuation Method Other than Replacement Cost – Agreed Value

□ Actual Cash Value: $_____ (NO Blanket)

□ Modified Replacement Cost: $_____ (NO Blanket)

_____Date_____ _____ Date_____

Signature, Pastor Signature, Chair of Local Church Trustees

_____Date_____

Signature, District Superintendent

_____Date_____ _____ Date_____

Signature, President of the Conference Trustees **OR** Signature, Conference Treasurer

Completed form must be sent to: *The Yellowstone Annual Conference of the United Methodist Church*
1220 Avenue C Apt C, Billings, MT 59102