

DIOCESE OF ALGOMA
P.O. BOX 1168, SAULT STE. MARIE, ONTARIO P6A 5N7

FULL REPLACEMENT INSURANCE REPORT

Date: _____

Parish No: _____

As per the motion passed at the November 2001 meeting of the Executive Committee which reads;

"That the Executive Committee direct all congregations in the diocese to inquire into the costs and benefits of full replacement insurance and report back to the annual meeting of the vestry; and , that the Executive Committee recommend the use of full replacement insurance for all congregations in the diocese."

***Important* Please complete the following report which is to be sent to the Regional Dean.**

PART A To be completed should the parish and insurance company agree the parish is fully insured.

Assessed Full Replacement Value: _____

Replacement Value Assessed By: _____

Insured Value: _____

(Incumbent)

(People's Warden)

(Rector's Warden)

PART B To be completed should the insurance company find the parish to be underinsured and the issue has been discussed at a vestry meeting.

We, the Incumbent and Wardens of _____ at
(Name of Parish)

_____ desire to advise that on _____
(Place) (Date)

a meeting of the Vestry was held and the following motion was passed:

_____ Members Present

_____ In Favour

_____ Opposed

(Incumbent)

(People's Warden)

(Rector's Warden)