



National Bond Center
 350 E. 96th Street
 Indianapolis, Indiana 46240
 +1 (888) 8442663 Fax: +1 (866)
 5474883

Report of Ren

April 1,
 LSF Comm
 Unknown Pro
 97

Registered:
 Market Segment:
 Producer Name:
 Agency Code:

Principal:
 Lyon County Water District
 PO Box 309
 Kuttawa, Kentucky 42055

Account:

Agency:
 RICHARD WHITTINGTON INS AGCY INC
 PO BOX 502
 EDDYVILLE, Kentucky 420380502

Invoiced to:
 RICHARD WHITTINGTON INS AGCY INC
 PO BOX 502
 EDDYVILLE, Kentucky 420380502

LMS Bond Number: LSF030494

Cross Reference: 3332998

Obligee:
 Comm of KY
 PO Box 3010
 Paducah, Kentucky 42002

Additional Obligees:

Bond Period: 6/30/2020 to 6/30/2021

Transaction Eff. Date: 6/30/2020

Cancellation Provision:

Premium Period: 6/30/2020 to 6/30/2021

Company: The Ohio Casualty Insurance Company

Renewal Type: Continuous Until Canceled

Bond Amount: 150,000.00 USD

Class Code: 910

Co-surety:

6.30.20 - 12.31.20 6 months \$ 1125
 1.01.21 - 6.30.21 6 months 1125

Bond Description:
 Highway and street permits

Transaction Comments:

Amt in USD

Bond Premium:	Producer Commission:	Taxes & Fees:
2,250.00		40.50

Net Premium: 1,615.50

Printed: 04/02/2020



Invoice

Kentucky Association of Counties All Lines Fund

400 Englewood Drive
 Frankfort, KY 40601
 Tel: 1-800-264-5226
 Fax: 1-502-875-8240

Invoice Number K200406
Invoice Date 05/28/2020
Due Date 08/01/2020

Insured Name and Address**Member Number** 0934

Lyon County Water District
 PO Box 489
 Kuttawa, KY 42055

Contact(s)

<u>First Name</u>	<u>Last Name</u>	<u>Title</u>	<u>Telephone</u>	<u>Fax</u>	<u>Email</u>
Dixie	Cayce	Superintendent	(270)388-0271	(270)388-9825	lyoncountyw24787@bellsouth.net

Invoice Detail

<u>Effective Date</u>	<u>Description</u>	<u>Premium</u>	<u>Amount Due</u>
07/01/2020	Annual Premium for 2020-2021 Policy Renewal	\$17,559.00	\$17,559.00
Total Due			\$17,559.00

Payment Options:

- Option 1: Save 1%; pay \$17,383.41 by due date
- Option 2: Pay 50% by due date; and 3 subsequent equal monthly payments
 50 % = \$8,779.50 plus 3 monthly payments of \$2,926.50

Please Note: Effective January 1, 2021, any outstanding balance due on this premium will accrue a compounding monthly interest charge of 0.5%. To make certain no interest is charged, be sure to make full payment postmarked no later than December 31, 2020.

7-30-20
 D & Cap



National Bond Center
 350 E. 96th Street
 Indianapolis, Indiana 46240
 +1 (888) 8442663 Fax: +1 (866)
 5474883

Report of Renewal

Registered:
Market Segment:
Producer Name:
Agency Code:

July 19, 2020
 LSF Commercial
 Unknown Producer
 971263

Principal:
 Lyon County Water District
 PO BOX 675
 Eddyville, Kentucky 42038

Account:

Agency:
 RICHARD WHITTINGTON INS AGCY INC
 PO BOX 502
 EDDYVILLE, Kentucky 420380502

Invoiced to:
 RICHARD WHITTINGTON INS AGCY INC
 PO BOX 502
 EDDYVILLE, Kentucky 420380502

LMS Bond Number: LSF031928

Cross Reference: 1834264

Obligee:
 Lyon County Water District
 PO Box 675
 Eddyville, Kentucky 42038

Additional Obligees:

Bond Period: 10/16/2020 to 10/16/2021

Transaction Eff. Date: 10/16/2020

Cancellation Provislon:

Premium Period: 10/16/2020 to 10/16/2021

Company: The Ohio Casualty Insurance Company

Renewal Type: Continuous Until Canceled

Bond Amount: 365,000.00 USD

Class Code: 119

Co-surety:

2020 Oct - Dec 3 months
 2021 Jan - Sept 9 months

Bond Description:
 Other public official

Transaction Comments:

Amt in USD

Bond Premium:	Producer Commission:	Taxes & Fees:
913.00	273.90	16.43

Net Premium: 655.53

KACo Insurance Agency

400 Englewood Drive
Frankfort, Kentucky 40601
Tel: 800-264-5226
Fax: 502-875-8242

INVOICE NO: B26353

INVOICE DATE: 11/23/2020

DUE DATE: 12/23/2020

INSURED:

Lyon County Water District
PO Box 489
Kuttawa

KY 42055

COUNTY: Lyon

BOND NO: 82C013486

EFFECTIVE: 01/25/2021 EXPIRES: 01/25/2022

PRINCIPAL: Lyon County Water District

OBLIGEE:

<i>Effective</i>	<i>Description</i>	<i>Annual Cost</i>	<i>Pro Rata Due</i>
01/25/2021	ANNUAL PREMIUM ON USDA POSITION SCHEDULE BOND RENEWAL	\$925.00	\$925.00

Sub Total:	\$925.00
KY Surcharge:	\$16.65

Payment Info

Date Paid:	<input type="text"/>
Amount Paid:	<input type="text"/>
Check No.	<input type="text"/>

Total Due: \$941.65

Please return a copy of this invoice with your payment!

* Per attached request, please have your current Chairman and Vice Chairman complete a copy of the attached application & return with payment *

Servicing Agency

Kentucky Association of Counties Insurance Agency
(800) 264-5226

MEMBER NO: 0934

KACo WORKERS COMPENSATION FUND

400 Englewood Drive
Frankfort, KY 40601
1-800-264-5226

CERTIFICATE OF WORKERS COMPENSATION COVERAGE

KACO W/C-4

- ITEM 1 -** Name and Address of Insured:
Lyon County Water District
PO Box 489
Kuttawa, KY 42055
- ITEM 2 -** Certificate Number: WC2020-2486
- ITEM 3 -** Effective Date: Wednesday, July 01, 2020 Expiration Date: Thursday, July 01, 2021
12:01 A.M., standard time at the address of the Insured as stated herein.
Cancellation Notice: 60 Days - Pursuant to KRS 304.50
- ITEM 4 -** Coverage under this Certificate applies to the Kentucky Workers Compensation Law. (KRS 342)
- ITEM 5 -** Company's Limit of Indemnity Each Occurrence:
(a) For Workers Compensation: Statutory
(b) For Employers Liability: \$2,500,000
- ITEM 6 -** Workers Compensation Premium: \$2,511.00
- ITEM 7 -** Special Fund Tax: \$161.00
- ITEM 8 -** **TOTAL PREMIUM:*** **\$2,672.00**
- ITEM 9 -** Payment Options:
(1) Full payment by 8/1/2020. 1% discount applied = \$2,645.28
(2) 50% payment by 8/1/2020 and 3 subsequent equal monthly prmts. on balance.
50% = \$1,336.01 Plus 3 monthly payments of \$445.33

Please Note: Effective January 1, 2021 any outstanding balance due on this premium will accrue a compounding monthly interest charge of 0.5%. To make certain no interest is charged, be sure to make full payment postmarked no later than December 31, 2020

* An invoice accompanies this declaration for the total amount due.

This Certificate of Coverage shall not be binding of the KACo Workers Compensation Fund unless countersigned by a duly authorized representative of the Fund.

THIS COVERAGE HAS BEEN PLACED WITH A WORKERS COMPENSATION SELF-INSURED GROUP WHICH HAS RECEIVED A CERTIFICATE OF FILING FROM THE COMMONWEALTH OF KENTUCKY. CLAIMS AGAINST GROUP MEMBERS ARE NOT COVERED BY THE KENTUCKY INSURANCE GUARANTY ASSOCIATION.

Dated at Frankfort, Kentucky this 28th day of May, 2020


Kris Dunn, Underwriting Manager

KACo
Making Workers Comp Work in Kentucky



National Bond Center
 350 E. 96th Street
 Indianapolis, Indiana 46240
 +1 (888) 8442663 Fax: +1 (866)
 5474883

Registered:
 Market Segment:
 Producer Name:
 Agency Code:

Report of Renewal

June 14, 2020
 LSF Commercial
 Unknown Producer
 971263

Principal:
 Lyon County Water District
 PO Box 309
 Kuttawa, Kentucky 42055

Account:

Agency:
 RICHARD WHITTINGTON INS AGCY INC
 PO BOX 502
 EDDYVILLE, Kentucky 420380502

Invoiced to:
 RICHARD WHITTINGTON INS AGCY INC
 PO BOX 502
 EDDYVILLE, Kentucky 420380502

LMS Bond Number: LSF031728

Cross Reference: 3776315

Obligee:
 Lyon County Water District
 PO Box 489
 Kuttawa, Kentucky 42055

Additional Obligees:

Bond Period: 9/11/2020 to 9/11/2021

Transaction Eff. Date: 9/11/2020

Cancellation Provision: 30 Days

Premium Period: 9/11/2020 to 9/11/2021

Company: The Ohio Casualty Insurance Company

Renewal Type: Continuous Until Canceled

Bond Amount: 300,000.00 USD

Class Code: 159

Co-surety:

Bond Description:

All other federal departments

Transaction Comments:

Amt in USD

Bond Premium:	Producer Commission:	Taxes & Fees:
750.00	225.00	13.50

Net Premium: 538.50