

Kentucky Association of Counties

All Lines Fund

400 Englewood Drive
Frankfort, KY 40601
Declarations Page

Policy Number P&C3371

Insured Name and Address

Jonathan Creek Water District
7564 US Hwy 68 E
Benton, KY 42025

Policy Period: 7/1/2021 to 7/1/2022

For customer service please call

(800)264-5226

Issued: 06/01/2021

Business Description Utilities

In return for the payment of the premium, and subject to all the terms of the policy, we agree to provide the insurance stated in the binder.

Coverage			Deductible
General Liability (Per OCC/AGG)	3,000,000	5,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Omissions (Per OCC/AGG)	3,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG) Retroactive Date: 07/01/2014	3,000,000	3,000,000	1,000
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	1,000,000	1,000,000	2,500
Auto Liability (CSL)	3,000,000		0
Auto Comprehensive	ACV		500
Auto Collision	ACV		500
P.I.P. (No Fault)	10,000		0
Under Insured/Un-Insured	60,000		0
Non Owned Auto Coverage	Primary		
Property/Buildings	As Per Statement on File		500
Personal Property	As Per Statement on File		500
Boiler & Machinery	15,000,000		1,000
Inland Marine & EDP	As Per Statement on File		500
Business Income	500,000	500,000	0
Flood (Excluding Special Hazard Area Flood - Zones A & V)	1,000,000	1,000,000	0
Earthquake	See Policy	See Policy	25,000
Crime (Other than Employee Dishonesty)	150,000		500
Employee Dishonesty	150,000		250
Legal Defense Coverage	50,000		0

Authorized
Representative



Date 6/1/2021

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Frankfort, KY 40601

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Insured Name and Address

Jonathan Creek Water District
7564 US Hwy 68 E
Benton, KY 42025

Policy Period: 7/1/2022 to 7/1/2023

For customer service please call

(800)264-5226

Issued: 05/26/2022

Business Description Utilities

In return for the payment of the premium, and subject to all the terms of the policy, we agree to provide the insurance stated in the binder.

Coverage			Deductible
General Liability (Per OCC/AGG)	3,000,000	5,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Omissions (Per OCC/AGG)	3,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG) Retroactive Date: 07/01/2014	3,000,000	3,000,000	1,000
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500
Auto Liability (CSL)	3,000,000		0
Auto Comprehensive	ACV		500
Auto Collision	ACV		500
P.I.P. (No Fault)	10,000		0
Under Insured/Un-Insured	60,000		0
Non Owned Auto Coverage	Primary		
Property/Buildings	As Per Statement on File		500
Personal Property	As Per Statement on File		500
Boiler & Machinery	15,000,000		1,000
Inland Marine & EDP	As Per Statement on File		500
Business Income	500,000	500,000	0
Flood (Excluding Special Hazard Area Flood - Zones A & V)	1,000,000	1,000,000	0
Earthquake	See Policy	See Policy	25,000
Crime (Other than Employee Dishonesty)	150,000		500
Employee Dishonesty	150,000		250
Legal Defense Coverage	50,000		0

Authorized
Representative



Date 5/26/2022

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: Jonathan Creek Water District 7564 US Hwy 68 E Benton, KY 42025
ITEM 2 -	Certificate Number: WC2022-3245
ITEM 3 -	Effective Date: Friday, July 01, 2022 Expiration Date: Saturday, July 01, 2023 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: \$6,985.00
ITEM 7 -	Special Fund Tax: \$485.00
ITEM 8 -	TOTAL PREMIUM:* \$7,470.00
ITEM 9 -	Payment Options: (1) Full payment by 8/1/2022. 1% discount applied = \$7,395.30 (2) 50% payment by 8/1/2022 and 3 subsequent equal monthly pmts. on balance. 50% = \$3,735.00 Plus 3 monthly payments of \$1,245.00

Please Note: Effective January 1, 2023 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, 2022

* 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 26th day of May, 2022


Kris Dunn, Associate Director of Insurance

KACo
Making Workers Comp Work in Kentucky



Regional Agent:
Clint Combs, Peel & Holland
Cell: 270-493-0002
Fax: 270-527-3847
PO Box 427
Benton, KY 42025

2021-2022 Earthquake Renewal Quote

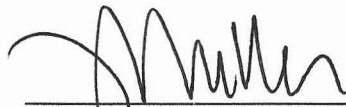
Member	Jonathon Creek Water
Carrier	Aspen
Limit	\$8,103,115
Deductible	\$25,000
TIV	\$2,500,000
21-22 Renewal Premium	\$7,773

Please indicate whether you would like to renewal coverage,
sign, and return no later than June 8, 2021

Yes

No

Please note: premium must be made payable to Peel & Holland and is due no later than 7/31/2021


Signed

06/02/21

Date

ePay: <https://peelholland.epaypolicy.com/>
Scan/return via email to: awallace@peelholland.com
Fax to: 270-527-3847
or mail to: Peel & Holland
PO Box 427
Benton, KY 42025