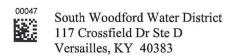


250 West Main Street, Suite 900 Lexington, KY 40507-1724 859-425-7800 www.kemi.com

July 1, 2019



INFORMATION PAGES FOR POLICY NUMBER – **327963** KEMI 007

1. Policyholder:

South Woodford Water District 117 Crossfield Dr Ste D

Versailles, KY 40383

Federal ID: 610951328 Entity type: Municipality

2. Policy Period:

Effective:

Expires:

12:01 AM

07/01/2019

12:01 AM

07/01/2020

3. Coverage, Limits and Endorsements:

- A. Part One of this policy applies only to the Workers' Compensation Laws of the Commonwealth of Kentucky.
- B. Part Two of this policy (Employers' Liability Insurance) is subject to the limits of our liability listed below:

Bodily Injury by Accident	\$100,000	each accident
Bodily Injury by Disease	\$500,000	policy limit
Bodily Injury by Disease	\$100,000	each employee



This policy includes these endorsements:

ENDORSEMENT CODE	ENDORSEMENT DESCRIPTION
KEMI_001_02	Special Fund Assessment
KEMI_002_03	Schedule of Additional Locations
KEMI_012_02	Premium Discount Endorsement
KEMI_034_03	Experience Rating for Modification Factor Endorsement
KEMI_044_05	Terrorism Risk Insurance Program reauthorization Act Disclosure
	Endorsement
KEMI_045_02	Catastrophe (Other than Certified Acts of Terrorism)Endorsement
KEMI_053	Application of Premium Payments Endorsement

4. Classifications

7520-000	Waterworks Operation & Drivers
8810-000	Clerical Office Employees NOC

CLASS RATING AND MANUAL PREMIUM DETAIL	EXPOSURE		RATE		PREMIUM
South Woodford Water District					
07/01/2019 - 07/01/2020					
7520-000		106,114		4.16	\$4,414.00
8810-000		35,877		.25	\$90.00

Total Manual Premium: \$4,504.00

PREMIUM CALCULATION DETAIL	TYPE	FACTOR	AMOUNT
07/01/2019 - 07/01/2020	Total Manual Premium		\$4,504.00
	Total Subject Premium		\$4,504.00
	Total Modified Premium		\$4,504.00
Final Estimate	Total Standard Premium		\$4,504.00
	Expense Constant		\$260.00
	Terrorism Charge		\$14.00
	Estimated Annual Premium		\$4,778.00
	Kentucky Special Fund		\$306.27
	Assessment		
	Total Amount Due		\$5,084.27



The INFORMATION PAGES and all the forms and endorsements and included with it, along with the policy document, complete this policy. Insurance under this policy is provided to the policyholder(s) listed in section 1 of the INFORMATION PAGES. In witness whereof the undersigned executed and attested this policy.



250 West Main Street, Suite 900 Lexington, KY 40507-1724 859-425-7800 www.kemi.com

July 1, 2020



South Woodford Water District 117 Crossfield Dr Ste D Versailles, KY 40383

INFORMATION PAGES FOR POLICY NUMBER – **327963** KEMI 007

1. Policyholder:

South Woodford Water District 117 Crossfield Dr Ste D

Versailles, KY 40383

Federal ID: 610951328 Entity type: Municipality

2. Policy Period:

Effective: 12:01 AM

07/01/2020

Expires:

12:01 AM 07/01/2021

3. Coverage, Limits and Endorsements:

- A. Part One of this policy applies only to the Workers' Compensation Laws of the Commonwealth of Kentucky.
- B. Part Two of this policy (Employers' Liability Insurance) is subject to the limits of our liability listed below:

Bodily Injury by Accident	\$100,000	each accident
Bodily Injury by Disease	\$500,000	policy limit
Bodily Injury by Disease	\$100,000	each employee



This policy includes these endorsements:

ENDORSEMENT CODE	ENDORSEMENT DESCRIPTION
KEMI_001_02	Special Fund Assessment
KEMI_002_03	Schedule of Additional Locations
KEMI_012_02	Premium Discount Endorsement
KEMI_034_03	Experience Rating for Modification Factor Endorsement
KEMI_044_05	Terrorism Risk Insurance Program reauthorization Act Disclosure
	Endorsement
KEMI_045_03	Catastrophe (Other than Certified Acts of Terrorism)Endorsement
KEMI_053	Application of Premium Payments Endorsement
KEMI_061	Audit NonCompliance Charge Endorsement

4. Classifications

7520-000	Waterworks Operation & Drivers
8810-000	Clerical Office Employees NOC

CLASS RATING AND MANUAL PREMIUM DETAIL	EXPOSURE	RATE	PREMIUM
South Woodford Water District			
07/01/2020 - 07/01/2021			
8810-000	35,779	.23	\$82.00
7520-000	105,824	4.08	\$4,318.00

Total Manual Premium: \$4,400.00

PREMIUM CALCULATION	TYPE	FACTOR	AMOUNT
DETAIL			
07/01/2020 - 07/01/2021	Total Manual Premium	100	\$4,400.00
	Total Subject Premium		\$4,400.00
	Total Modified Premium		\$4,400.00
Final Estimate	Total Standard Premium		\$4,400.00
	Expense Constant		\$260.00
	Terrorism Charge		\$14.00
	Catastrophe Charge		\$14.00
	Estimated Annual Premium		\$4,688.00
	Kentucky Special Fund		\$300.50
	Assessment		
	Total Amount Due		\$4,988.50



The INFORMATION PAGES and all the forms and endorsements and included with it, along with the policy document, complete this policy. Insurance under this policy is provided to the policyholder(s) listed in section 1 of the INFORMATION PAGES. In witness whereof the undersigned executed and attested this policy.



July 1, 2021

250 West Main Street, Suite 900 Lexington, KY 40507-1724 859-425-7800 www.kemi.com



South Woodford Water District 117 Crossfield Dr Ste D Versailles, KY 40383

INFORMATION PAGES FOR POLICY NUMBER – **327963** KEMI 007

1. Policyholder:

South Woodford Water District 117 Crossfield Dr Ste D

Versailles, KY 40383

Federal ID: 610951328 Entity type: Municipality

2. Policy Period:

Effective: 12:01 AM

07/01/2021

Expires:

12:01 AM

07/01/2022

3. Coverage, Limits and Endorsements:

- A. Part One of this policy applies only to the Workers' Compensation Laws of the Commonwealth of Kentucky.
- B. Part Two of this policy (Employers' Liability Insurance) is subject to the limits of our liability listed below:

Bodily Injury by Accident	\$100,000	each accident
Bodily Injury by Disease	\$500,000	policy limit
Bodily Injury by Disease	\$100,000	each employee



This policy includes these endorsements:

1 1	
ENDORSEMENT CODE	ENDORSEMENT DESCRIPTION
KEMI_001_03	Special Fund Assessment
KEMI_002_03	Schedule of Additional Locations
KEMI_012_02	Premium Discount Endorsement
KEMI_034_03	Experience Rating for Modification Factor Endorsement
KEMI_044_06	Terrorism Risk Insurance Program reauthorization Act Disclosure
	Endorsement
KEMI_045_04	Catastrophe (Other than Certified Acts of Terrorism)Endorsement
KEMI_053	Application of Premium Payments Endorsement
KEMI_061	Audit NonCompliance Charge Endorsement

4. Classifications

7520-000	Waterworks Operation & Drivers
8810-000	Clerical Office Employees NOC

CLASS RATING AND MANUAL PREMIUM DETAIL	EXPOSURE	RATE	PREMIUM
South Woodford Water District			,
07/01/2021 - 07/01/2022			
8810-000	35,779	.22	\$79.00
7520-000	105,824	3.59	\$3,799.00

Total Manual Premium: \$3,878.00

PREMIUM CALCULATION DETAIL	ТҮРЕ	FACTOR	AMOUNT
07/01/2021 - 07/01/2022	Total Manual Premium		\$3,878.00
	Total Subject Premium		\$3,878.00
	Total Modified Premium		\$3,878.00
Final Estimate	Total Standard Premium		\$3,878.00
	Expense Constant		\$260.00
	Terrorism Charge		\$14.00
	Catastrophe Charge		\$14.00
	Estimated Annual Premium		\$4,166.00
	Kentucky Special Fund		\$292.45
	Assessment		
	Total Premium & Assessment		\$4,458.45



The INFORMATION PAGES and all the forms and endorsements and included with it, along with the policy document, complete this policy. Insurance under this policy is provided to the policyholder(s) listed in section 1 of the INFORMATION PAGES. In witness whereof the undersigned executed and attested this policy.