

INVOICE

00814



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

Invoice Date
January 4, 2021
Invoice Number
2621161
Policy Number
327963
Current Balance
- \$834.25
Due Date
N/A

Current Balance
- \$834.25

AGENT: ASSUREDPARTNERS NL LLC

There is no new transaction on this invoice statement

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
- \$834.25		\$0.00		\$0.00		- \$834.25

RETURN PAYMENT STUB

For billing inquiries, please call your agent or (859) 425-7800.

Policy Number
327963

Invoice Number
2621161

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Kentucky Employers' Mutual Insurance
Payment Processing Center
P.O. Box 12500
Lexington, KY 40583-2500

Due Date: N/A
Amount Due: \$0.00

INVOICE

00563



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

Invoice Date
February 1, 2021
Invoice Number
2629087
Policy Number
327963
Current Balance
- \$834.25
Due Date
N/A

AGENT: ASSURED PARTNERS NL LLC

There is no new transaction on this invoice statement

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
- \$834.25		\$0.00		\$0.00		- \$834.25

RETURN PAYMENT STUB

For billing inquiries, please call your agent or (859) 425-7800.

Policy Number
327963

Invoice Number
2629087

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Kentucky Employers' Mutual Insurance
Payment Processing Center
P.O. Box 12500
Lexington, KY 40583-2500

Due Date: N/A
Amount Due: \$0.00



INVOICE



00750
South Woodford Water District
117 Crossfield Dr Ste D
Versailles, KY 40383

Invoice Date	March 1, 2021
Invoice Number	2637088
Policy Number	327963
Current Balance	Due Date
-\$834.25	N/A

AGENT: ASSUREDPARTNERS NL LLC

There is no new transaction on this invoice statement

Previous Balance	Payment Received	Current Charges	Current Balance
-\$834.25	\$0.00	\$0.00	-\$834.25

RETURN PAYMENT STUB

For billing inquiries, please call your agent or (859) 425-7800.

Policy Number

327963

Invoice Number

2637088

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To make a payment instantly, visit

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5. Write questions or comments on separate enclosure.

Kentucky Employers' Mutual Insurance
Payment Processing Center
P.O. Box 12500
Lexington, KY 40583-2500

Due Date: N/A
Amount Due: \$0.00

INVOICE

00306



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

Invoice Date
April 1, 2021
Invoice Number
2646195
Policy Number
327963
Current Balance
- \$834.25
Due Date
N/A

AGENT: ASSUREDPARTNERS NL LLC

There is no new transaction on this invoice statement

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
- \$834.25		\$0.00		\$0.00		- \$834.25

RETURN PAYMENT STUB

For billing inquiries, please call your agent or (859) 425-7800.

Policy Number
327963

Invoice Number
2646195

Please check this box for change of address or e-mail update (on reverse).

To make a payment instantly, visit

www.kemi.com/pay

If mailing payment, please:

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Kentucky Employers' Mutual Insurance
Payment Processing Center
P.O. Box 12500
Lexington, KY 40583-2500

Due Date: N/A
Amount Due: \$0.00

INVOICE



00496
South Woodford Water District
117 Crossfield Dr Ste D
Versailles, KY 40383

Invoice Date	May 27, 2021
Invoice Number	2662680
Policy Number	327963
Current Balance	Due Date
\$1,394.98	06/26/2021

AGENT: ASSUREDPARTNERS NL LLC

Current Transactions

Explanation		Policy Period		Amount
		From	To	
Premium Installment	#1	07/01/2021	07/01/2022	\$2,083.00
Special Fund Assessment Installment	#1	07/01/2021	07/01/2022	\$146.23
Current Charges				\$2,229.23

10633

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
-\$834.25		\$0.00		\$2,229.23		\$1,394.98

Death Injury by Disease \$100,000 each employee



Quote for Workers Compensation Coverage
327963-- 07/01/2021-07/01/2022

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

PREMIUM CALCULATION DETAIL	TYPE	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 Assessment		\$292.45
	Total Premium & Assessment		\$4,458.45

TOTAL ESTIMATED ANNUAL POLICY PREMIUM **\$4,458.45**

Payment Plan Eligibility: Three-Payment Plan

Required Initial Installment Premium:

BILLING SCHEDULE BILL DATE	BILLING SCHEDULE BILL AMOUNT
05/27/2021	\$2,229.23
08/01/2021	\$1,114.61
09/01/2021	\$1,114.61

This renewal quotation is based on the information provided by the expiring policy. Any changes in this information unknown at the time of this quotation could change the policy premium. Notify KEMI immediately of any and all changes. If not paid by the renewal date, coverage will expire.

cc: AssuredPartners NL LLC



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Quick Pay - Payment Received

South Woodford Water District

117 Crossfield Dr Ste D
Versailles, KY 40383
(859)873-1308

PAYMENT SUCCESS!



printer friendly version

Policy Number: 327963

Payment Amount: \$1,394.98

Payment Date: 07/06/2021

Payment Time: 04:04:59 pm

Payment Tracking Number: 200247663

- You will be contacted by one of our representatives if there are any questions.
- Electronic withdrawals are typically processed through the regular banking system within one to three business days.
- Payments submitted prior to 6 p.m on a normal business day will be posted to your account the same day. Payments submitted after 6 p.m will be posted the next business day.
- If you have any questions about this payment, please contact KEMI at 1-800-640-KEMI(5364) or answers@kemi.com. Please reference your payment tracking number **Tracking Number 200247663**



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Kentucky Employers' Mutual Insurance 250 W. Main St., Ste. 900 Lexington, KY 40507
859-425-7800

INVOICE

00293



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

Invoice Date	July 1, 2021
Invoice Number	2672583
Policy Number	327963
Current Balance	Due Date
\$1,394.98	UPON RECEIPT

AGENT: ASSUREDPARTNERS NL LLC

There is no new transaction on this invoice statement

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
\$1,394.98		\$0.00		\$0.00		\$1,394.98

RETURN PAYMENT STUB

For billing inquiries, please call your agent or (859) 425-7800.

Policy Number
327963

Invoice Number
2672583

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www.kemi.com/pay

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Kentucky Employers' Mutual Insurance
Payment Processing Center
P.O. Box 12500
Lexington, KY 40583-2500

Due Date: UPON RECEIPT

Amount Due: \$1,394.98

INVOICE

00866



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

Invoice Date
August 2, 2021
Invoice Number
2681055
Policy Number
327963
Current Balance
Due Date
\$1,566.91
08/27/2021

Current Balance
\$1,566.91

AGENT: ASSUREDPARTNERS NL LLC

Current Transactions

Explanation	Policy Period		Amount
	From	To	
Audit Premium Adjustment	07/01/2020	07/01/2021	\$1,736.00
Audit Special Fund Assessment Adjustment	07/01/2020	07/01/2021	\$111.28
Premium Installment #2	07/01/2021	07/01/2022	\$1,041.50
Special Fund Assessment Installment #2	07/01/2021	07/01/2022	\$73.11
Current Charges			\$2,961.89

10699

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
\$1,394.98		\$2,789.96		\$2,961.89		\$1,566.91

July 15, 2021



00387
South Woodford Water District
117 Crossfield Dr Ste D
Versailles, KY 40383

Final Audit Summary

Policy:	327963	Audit Date:	07/15/2021
Policy Name:	South Woodford Water District	Audit Type:	Online Audit
Agent:	AssuredPartners NL LLC		
Policy Period:	07/01/2020 – 07/01/2021		
Days in Force:	365		

Code	Description	Payroll	Rate/ \$100	Premium
7520	Waterworks Operation & Drivers 2-South Woodford Water District	\$150,887.00	\$4.08	\$6,156.00
8810	Clerical Office Employees NOC 2-South Woodford Water District	\$46,095.00	\$0.23	\$106.00

Total Manual Premium		\$6,262.00
Premium Discount		-\$138.00
Expense Constant		\$260.00
Terrorism Charge	.01	\$20.00
Catastrophe Charge	.01	\$20.00
Total Premium		\$6,424.00
Kentucky Special Fund Assessment	6.41%	\$411.78
Grand Total		\$6,835.78

Additional Premium/Return Premium: \$1,847.28

NOTICE

Any premium adjustment will be invoiced on your next statement.

INVOICE

00388



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

Invoice Date	
September 1, 2021	
Invoice Number	
2689563	
Policy Number	
327963	
Current Balance	Due Date
\$940.89	09/26/2021

AGENT: ASSUREDPARTNERS NL LLC

Current Transactions

Explanation		Policy Period		Amount
		From	To	
Premium Installment	#3	07/01/2021	07/01/2022	\$879.17
Special Fund Assessment Installment	#3	07/01/2021	07/01/2022	\$61.72
Current Charges				\$940.89

10945

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
\$1,566.91		\$1,566.91		\$940.89		\$940.89

INVOICE



00354
South Woodford Water District
117 Crossfield Dr Ste D
Versailles, KY 40383

2430

Invoice Date	
October 1, 2021	
Invoice Number	
2697615	
Policy Number	
327963	
Current Balance	Due Date
\$940.89	10/26/2021

AGENT: ASSUREDPARTNERS NL LLC

Current Transactions

Explanation		Policy Period		Amount
		From	To	
Premium Installment	#4	07/01/2021	07/01/2022	\$879.17
Special Fund Assessment Installment	#4	07/01/2021	07/01/2022	\$61.72
Current Charges				\$940.89

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
\$940.89		\$940.89		\$940.89		\$940.89



00568111
00568

Making workers' comp work

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

INVOICE



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

2468

Invoice Date
November 1, 2021
Invoice Number
2704823
Policy Number
327963
Current Balance
\$940.87
Due Date
11/26/2021

AGENT: ASSUREDPARTNERS NL LLC

Current Transactions

Explanation		Policy Period		Amount
		From	To	
Premium Installment	#5	07/01/2021	07/01/2022	\$879.16
Special Fund Assessment Installment	#5	07/01/2021	07/01/2022	\$61.71
Current Charges				\$940.87

Previous Balance	-	Payment Received	+	Current Charges	=	Current Balance
\$940.89		\$940.89		\$940.87		\$940.87