

# Payment Invoice



Insurance Company of the West  
PO Box 509039  
San Diego, CA 92150-9039

Invoice Date: 08/02/2022  
Invoice Number: 200000493751  
Policy Number: WKY-5049756-03

UNION COUNTY WATER DISTRICT  
PO BOX 146  
MORGANFIELD KY 42437

E.M. FORD & CO., LLC  
600 FREDERICA STREET  
OWENSBORO KY 42301

Policy Number	Description	Period	Amount	Due
WKY-5049756-03	Deposit	08/01/22-08/01/23	\$1,926.00	08/17/22
WKY-5049756-03	Assessments & Surcharges - KY	08/01/22-08/01/23	\$134.00	08/17/22
<b>Total Due:</b>			<b>\$2,060.00</b>	<b>***See Terms</b>

## Terms

All payments will be applied in the following order: Oldest premiums either on your current or previous policy term, past due fees, current premiums, current fees.

Alternate payment instructions submitted with your check or invoice will not be honored; please contact us if other arrangements are necessary.

\* Balance forward may span multiple periods.

\*\* Outstanding credit balance will be applied to this invoice; outstanding debit balance must be paid immediately to avoid cancellation.

\*\*\* Your policy will be subject to cancellation if the total amount due is not received by the due date; if total amount due is a credit it will be applied to your next invoice.

There may be a charge of up to \$25.00 for each transaction rejected due to nonsufficient funds (NSF). Any NSF may result in policy cancellation.

**Billing Inquiries:** 1.800.877.1111 (M-F 8am - 5pm PST) or [BillingServices@icwgroup.com](mailto:BillingServices@icwgroup.com)

If not paying electronically, please detach along perforation and remit with payment



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Visit <http://icwgroup.com/payments> to expedite payment and view payment options!

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Mail & make payments to:  
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San Diego, CA 92150-9039

**Total Due**  
**\$2,060.00**

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