## SUMMARY OF PREMIUMS CHARGED

Attached to and forming part of

POLICY NUMBER: ETD 045 33 37 / ETA 045 33 37

Effective Date: 08-01-2021

Named Insured: GREEN TAYLOR WATER DISTRICT

## THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM CHARGE IS INDICATED

Commercial Property Coverage Part W/EBC	\$	7,198
Commercial General Liability Coverage Part	\$	4,241
Commercial Auto Coverage Part	\$	7,150
Commercial Umbrella / Excess Liability Coverage Pa	t <b>\$</b> _	3,563
DATA DEFENDER COVERAGE PART	\$	87
NETWORK DEFENDER COVERAGE PART	\$	242
CRIME AND FIDELITY COVERAGE PART	\$	254
CRIME EXPANDED COVERAGE PLUS	\$	170
CONTRACTORS EQUIPMENT SCHEDULED	\$	814
KY MUNICIPAL TAX - REFER TO IA4376KY	\$	2,705
KY SURCHARGE - REFER TO TA4376KY	\$	433
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Terrorism Coverage	\$	257
Installment Charge	\$	
ANNUAL TOTAL PAYMENTS	\$ _	27,114
li	First nstallment	Remaining nstallment(s)
ANNUAL *	*	

\*SEE BILLING STATEMENT MAILED SEPARATELY

Automobile Coverages, Employers Liability, Employment Practices Liability Coverage, Professional Liability Coverage, Terrorism Coverage and / or Wrongful Acts Coverage, if included in the policy, are subject to Annual Adjustment of rates and premium on each anniversary of the policy.

Commercial Umbrella and Excess Liability, if included in the policy, may be subject to Annual Adjustment of premium on each anniversary. Refer to the Commercial Umbrella or Excess Liability Coverage Part Declarations form to see if this is applicable.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

# THE CINCINNATI CASUALTY COMPANY CINCINNATI, OHIO

#### **BUSINESS AUTO COVERAGE PART DECLARATIONS**

	SS AUTO COVER	AGE PART DECLARATIONS	
ITEM ONE Attached to and forming part of Property of P	OLICY NUMBER: ETA	045 33 37	
Named Insured is the same as it :	appears in the Common I	Policy Declarations.	
ITEM TWO SC	HEDULE OF COVERAC	SES AND COVERED AUTOS	
This coverage part provides only	those coverages where a	premium or "incl" is shown in the premium column	below.
The limit of Insurance for each co	verage listed is subject to	all applicable policy provisions. Each of these cov	erages
		"Autos" are shown as covered "autos" for a particul	
Coverage by the entry of one or m Coverage Form next to the name		the COVERED AUTO Section of the Business Auto	
Coverage Form flext to the manne	COVERED AUTOS	LIMIT	
	(Entry of one or more	Envir	
COVERAGES	of the symbols from the	THE MOST WE WILL PAY FOR ANY ONE	PREMIUM
	COVERED AUTOS	ACCIDENT OR LOSS	
	Section of the Business		
	Auto Coverage Form		
	shows which autos are covered autos)		
LIABILITY	1	\$ 1,000,000	INCL
	1		
PERSONAL INJURY PROTECTION		Separately stated in each P.I.P.	
or equivalent No-fault coverage)	5	endorsement minus \$ NONE Ded.	INCL
ADDED PERSONAL INJURY		Separately stated in each added P.I.P.	
PROTECTION (or equivalent		endorsement	
added No-fault coverage)			
PROPERTY PROTECTION		Separately stated in each P. P.I.	
NSURANCE (Michigan only)		endorsement minus \$ Ded. for each accident	
AUTO. MEDICAL PAYMENTS		for each accident	
AUTO. MEDICAL PATMENTS		\$	
UNINSURED MOTORISTS	2	\$ 100,000	TNCI
UNDERINSURED MOTORISTS		\$ 100,000	INCL
(When not included in	2	\$ SEE AA4183	INCL
Uninsured Motorists Coverage)			
		Actual cash value or cost of repair,	
PHYSICAL DAMAGE	7	Whichever is less minus \$ SEE AA4183	
COMPREHENSIVE COVERAGE		Ded. For each covered auto. But no Deductible applies to loss caused by	INCL
		Fire or lightning. See Item Three for hired or	INCL
		borrowed "autos"	
the control of the co		Actual cash value or cost of repair.	
PHYSICAL DAMAGE SPECIFIED		Whichever is less minus \$ Ded. For	
CAUSES OF LOSS COVERAGE		Each covered auto. For loss caused by mischief	
		or vandalism. See Item Three for hired or borrowed "autos"	
PHYSICAL DAMAGE	***************************************	Actual cash value or cost of repair.	
COLLISION COVERAGE	7	Whichever is less minus \$ SEE AA4183	INCL
		Ded for each covered auto. See Item	
		Three for hired or borrowed "autos".	
PHYSICAL DAMAGE INSURANCE			
TOWING AND LABOR	7	\$ SEE AA4183 for each disablement of a	INCL
PREMIUM FOR ENDORSEMENT	TS	private passenger auto	
PREIMIONIT OR ENDORSEMEN	13	*ESTIMATED TOTAL PREMIUM	INCL
FORMS AND ENDORSEMENTS	CONTAINED IN THIS CO	OVERAGE PART AT ITS INCEPTION:	
AA4183 02/06 AUTOMOE			
AA101 03/06 BUSINES	S AUTO COVERAGE		
AA2009 01/17 CHANGES	- TOWING AND LA	BOR	
AA296 07/12 CHANGES	- AUDIO, VISUAL	AND DATA ELECTRONIC EQUIPMENT COVE	ERAGE
AA4001KY 11/16 KENTUCE	Y UNINSURED MOTO	RIST COVERAGE	

FORMS AND ENDORSEMENTS CONTAINED IN THIS COVERAGE PART AT ITS INCEPTION:

AA4002KY 11/16 KENTUCKY UNDERINSURED MOTORIST COVERAGE

AA4263 04/10 OFFICE OF FOREIGN ASSETS CONTROL (OFAC) COMPLIANCE ENDORSEMENT

AA4330KY 11/17 UNINSURED/UNDERINSURED MOTORIST COVERAGE OPTION

SELECTION/REJECTION FORM - KENTUCKY

CA0125 12/02 KENTUCKY CHANGES

CA2216 03/11 KENTUCKY PERSONAL INJURY PROTECTION

AA288 01/16 CINCIPLUS® BUSINESS AUTO XC+® (EXPANDED COVERAGE PLUS) ENDORSEMENT

<sup>\*</sup> This policy may be subject to final audit

# QUICK REFERENCE COMMERCIAL AUTO COVERAGE PART BUSINESS AUTO COVERAGE FORM

## READ YOUR POLICY CAREFULLY

DECLARATIONS PAGES
Named Insured and Mailing Address Policy Period Description of Business Coverages and Limits of Insurance
SECTION I - COVERED AUTOS Beginning on Page
Description of Covered Auto Designation Symbols
SECTION II - LIABILITY COVERAGE
Coverage       2         Who is an Insured       2         Coverage Extensions       2         Supplementary Payments       2         Out of State       3         Exclusions       3         Limit of Insurance       5
SECTION III - PHYSICAL DAMAGE COVERAGE
Coverage
SECTION IV - BUSINESS AUTO CONDITIONS
Loss Conditions Appraisal for Physical Damage Loss 9 Duties in the Event of Accident, Claim, Suit or Loss 9 Legal Action Against Us 9 Loss Payment - Physical Damage Coverages 9 Transfer of Rights of Recovery Against Others to Us 10 General Conditions 10 Concealment, Misrepresentation or Fraud 10 Liberalization 10 No Benefit to Bailee - Physical Damage Coverages 10 Other Insurance 10 Premium Audit 10 Policy Period, Coverage Territory 10 Two or More Coverage Forms or Policies Issued by Us 11
SECTION V - DEFINITIONS
COMMON POLICY CONDITIONS Cancellation Changes Examination of Your Books and Records Inspections and Surveys Premiums Transfer of Your Rights and Duties under this Policy
ENDORSEMENTS (If Any)



Quote Date:

July 25, 2022

Quote for:

**GREEN TAYLOR WATER DISTRICT** 

Policy Term:

08/01/2022 - 08/01/2023

Payment Plan:

Annual

Company:

**U.S. Specialty Insurance Company** 

#### General Liability - Occurrence Form

Subject to \$1,000,000 per Occurrence / \$3,000,000 Aggregate

Subject to \$0 Deductible

Sexual Abuse Endorsement \$1,000,000 / \$1,000,000

Damage to Premises Rented to you \$500,000 Subject to General Liability Deductible

Medical Payments \$10,000

Cemetery Professional - No Coverage

Pesticide or Herbicide \$25,000 per Occurrence / \$25,000 Aggregate

Nurses Professional Liability - No Coverage

Failure of Dam, Reservoir, Levee, Dike Coverage - No Coverage

Emergency Response Operations - Excluded

Mutual Aid Property Damage - Excluded

Sewer Backup Liability - Included

Special Events: Subject to receipt of Special Events Application, Risk Control review and Underwriting approval (Additional Premium may apply)

Fireworks Liability: Subject to receipt of Special Events Application, Risk Control review and Underwriting approval prior to binding coverage. All fireworks displays must be ignited/discharged by a licensed and insured pyro technician. Additional Premium will Apply.

#### **Employee Benefits - Claims Made Form**

Subject to \$1,000,000 per Occurrence / \$3,000,000 Aggregate Subject to \$1,000 Deductible Including Claims Expense

Claims Made Retro Date: 08/01/2017

#### Liquor Liability - Coverage limited to Host Liquor

#### Public Officials Wrongful Acts Liability - Claims Made Form

Subject to \$1,000,000 per Occurrence / \$1,000,000 Aggregate

Subject to \$2,500 Deductible - Including Claims Expense

Claims Made Retro Date: 08/01/2017

Non-Monetary Damage \$25,000 Per Suit / \$50,000 Per Policy Limit Subject to Deductible

Private Property Use Restriction Sublimit - No Coverage

#### **Employment Practices Liability Insurance - Claims Made Form**

Subject to \$1,000,000 per Occurrence / \$1,000,000 Aggregate

Subject to \$2,500 Deductible - Including Claims Expense

Claims Made Retro Date: 08/01/2017

Non-Monetary Damage \$25,000 Per Suit / \$50,000 Per Policy Limit Subject to Deductible

Wage & Hour Defense Coverage - \$100,000 Subject to Deductible

Non-Employment Related Harassment - Medium Hazard Subject to Deductible

Quote for: GREEN TAYLOR WATER DISTRICT

Page 1 of 6



#### Law Enforcement Liability - No Coverage

**Excess Liability** 

Coverage applies to General Liability, Employee Benefits, Public Officials Wrongful Acts, Employment Practices,

Auto Liability and Employers Liability

Excludes Uninsured Motorist and Underinsured Motorist Coverage

Subject to \$4,000,000 per Occurrence / \$4,000,000 Aggregate

Excludes Zoning, Regulation, and Permissive Use of Property

Pollution Exclusion Exception - Pollution with Potable Water and Hostile Fire

Dam, Reservoir, Levee, Dike: No Coverage

**Employers Liability** Carrier: KEMI

Subject to: \$1,000,000 Each Accident for Injury

\$1,000,000 Policy Limit for Disease \$1,000,000 Each Employee for Disease

Subject to Underwriting approval prior to binding coverage

Total Building and Contents Limit

\$4,988,147

Coinsurance - N/A \$2,500 Deductible

Subject to: **Blanket Basis** 

Agreed Amount

Included Included

Building Valuation-per schedule on file with company

Replacement Cost,

Special Form

Accounts Receivable **Animal Mortality** 

**Building Ordinance or Law** 

Included

\$250,000 any one occurrence

\$10,000 any one occurrence

\$250,000 Undamaged portion / or demolition

10% of reported values (Increased cost of construction) \$250,000 any one occurrence

**Business Income** Extra Expense

**Communication Towers** 

Debris Removal

**Electrical Utility Service Interruption** 

**EDP** Coverage

Fine Arts

\$500,000 any one occurrence \$100,000 any one occurrence

25% of Loss +\$10,000 any one occurrence

\$25,000 any one occurrence \$250,000 any one occurrence In transit subject to \$10,000 limit

Mechanical Breakdown subject to \$10,000 limit

Fairs or Exhibitions

Fire Department Service Charge

Foundations of Machinery

Fire Equipment Recharge

Golf Course Greens

Grounds Maintenance Equipment

Inventory or Appraisal

Newly Acquired or Constructed Prop - Building Newly Acquired or Constructed Prop - Contents

Paved Surfaces

Personal Property of Others

Property in Transit Property off Premises \$50,000 any one occurrence

\$5,000 any one item, \$25,000 any one occurrence

\$5,000 for your liability \$500,000 any one occurrence

\$5,000 for each separate 12 month period

\$100,000 any one occurrence \$100,000 any one occurrence

\$10,000 any one claim

\$1,000,000 at each building \$250,000 at each building

\$100,000 any one occurrence \$15,000 any one Occurrence \$25,000 any one occurrence

\$100,000 any one occurrence



Underground Pipes, Flues or Drains

Valuable Papers & Records - Cost of Research

Water Back Up - Sewer or Drain

**Unnamed Locations Expediting Expense** 

Earthquake Coverage

Flood Coverage

\$1,000,000 any one occurrence \$250,000 any one occurrence

\$50,000 for direct physical loss or damage \$50,000 any location not on file with Company

\$25,000 any one occurrence

\$1,000,000 subject to \$50,000 Deductible \$1,000,000 subject to \$50,000 Deductible

Any location in the following flood zones are excluded: Flood Zones A, A1 - A30, A99, AE, AH, AO, AR, AR/AE, AR/AO, AR/A1 - A30, AR/A, V, V1 - V30, VE. Additionally, we will not cover FEMA zones designated as B or X (shaded). Any areas later designated by FEMA as a high risk area at the time of a Covered Cause of Loss is also subject to this limitation.)

Equipment & Mechanical Breakdown (Boiler)

Included

Subject to: \$2,500 Deductible

#### Automobile

Based on 10 vehicles - Schedule on file with Company

Subject to \$1,000,000 Liability Limit

Subject to \$0 Deductible

Emergency Vehicle Endorsement - Standard Form

Fellow Employee Coverage

Rental Reimbursement - PPT Only - \$30 per day / 30 days / \$900 any one period

\$100,000 Uninsured Motorist Coverage limit

\$100,000 Underinsured Motorist Coverage limit

Hired and Non Owned Automobile Liability

Personal Injury Protection -

Physical Damage per schedule on file with company

Comprehensive Deductible: \$500

Collision Deductible: \$500

Physical Damage to Volunteers or Employees Personal Auto

Auto Catastrophic Coverage - No Coverage

Garage Keepers Legal - No Coverage

Impound Vehicles Coverage - No Coverage

#### **Inland Marine**

Subject to \$1,000 Deductible

Scheduled Contractors Equipment - Per Schedule on file with company

\$258,000

Valuation: Replacement Cost - per schedule on file

80% Coinsurance

Misc. Property & Equipment

No single item to exceed \$10,000 in value

**Emergency Portable Equipment** 

\$55,000 \$50,000

Valuation Replacement Cost applies to Misc. Property & Equipment and Emergency Portable Equipment

Contractors Equipment Rented From Others

\$50,000

less than 90 days

Rental Reimbursement

Flood Limit

\$5,000 No Coverage

Earth Movement Limit

No Coverage

Aircraft Non-Operating Shell

**Total Limit** 

\$413,000

Quote for: GREEN TAYLOR WATER DISTRICT

Page 3 of 6



#### EDP - Limited to coverage provided under Property Extensions

#### Crime

Coverage Form B, C & F Subject to \$1,000 Deductible

B. Forgery or Alteration \$25,000
C. Theft, Disappearance and Destruction In/Out \$45,000
Tax Time Limit \$45,000
F. Computer Fraud \$25,000

Coverage Form O & P Subject to \$1,000 Deductible

O. Employee Dishonesty – Per Loss P. Employee Dishonesty – Per Employee

Includes Faithful Performance

No Coverage \$150,000

Annual Package Premium \$ 22,335.00
Kentucky Surcharge Fee: \$ 402.03
Total Annual Premium \$ 22,737.03

\*\*Note: Terrorism option and optional quoted premiums are not included in installment plan premiums.

\*\*Note: MINE SUBSIDENCE COVERAGE IS AVAILABLE. IF QUOTE IS DESIRED, PLEASE ADVISE

\*\*Note: Mold, Fungi & Bacterial Exclusion Included

\*\*Note: All SIR's Include Loss, Loss Adjustment Expense and Supplementary Payments

\*\*Note: Failure of any Dam, Levee or Dike Exclusion Included

Limited Terrorism coverage and pricing subject to the Terrorism Risk Insurance Act as reauthorized in 2019.

TRIA DOES NOT APPLY TO AUTO LIABILITY, AUTO PHYSICAL DAMAGE, CRIME, EMPLOYEE BENEFITS, PUBLIC OFFICIALS WRONGFUL ACTS LIABILITY OR LAW ENFORCEMENT

U.S. Specialty Insurance Company, Additional premium for limited terrorism coverage (not included in above package quote):

PROPERTY AND/OR CASUALTY LIMITED TERRORISM COVERAGE (REAUTHORIZED IN 2019) \$169

NOTE: The following forms need to be signed and returned prior to binding coverage:

- ~ Application Declaration
- ~ Terrorism Form
- ~ Uninsured / Underinsured Motorist Forms

Quote for: GREEN TAYLOR WATER DISTRICT



#### **Special Conditions:**

The rates used to determine the premium for this policy are guaranteed to remain the same during the three consecutive policy periods (2022, 2023, 2024) if the "Account Loss Ratio" does not exceed the following Guidelines.

First Anniversary (2023)

"Account Loss Ratio" at 9 months I 18%

Second Anniversary (2024)

"Account Loss Ratio" at 21 months I 24%

If the "Account Loss Ratio" exceeds the above percentage(s), we reserve the right to increase the rates used to determine your premium at either the first or second anniversary date of the Policy.

QUOTE GOOD FOR 30 DAYS ONLY ENTIRE QUOTE SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY.

Quote for: GREEN TAYLOR WATER DISTRICT Page 5 of 6



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

July 1, 2021



Green Taylor Water District PO Box 218 Greensburg, KY 42743

#### INFORMATION PAGES FOR POLICY NUMBER – **376063** KEMI 007

1. Policyholder:

Green Taylor Water District PO Box 218

Greensburg, KY 42743

Federal ID: 610662066 Entity type: Municipality

#### 2. Policy Period:

Effective:

Expires:

12:01 AM

07/01/2021

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	\$1,000,000	each accident
Bodily Injury by Disease	\$1,000,000	policy limit
Bodily Injury by Disease	\$1,000,000	each employee



This policy includes these endorsements:

ENDORSEMENT CODE	ENDORSEMENT DESCRIPTION
KEMI_001_03	Special Fund Assessment
KEMI_002_03	Schedule of Additional Locations
KEMI_012_02	Premium Discount Endorsement
KEMI_014_04	Experience Modification 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
8742-000	Salesmen Collectors or Messengers - Outside
8810-000	Clerical Office Employees NOC

CLASS RATING AND MANUAL PREMIUM DETAIL	EXPOSURE	RATE	PREMIUM
Green Taylor Water District			
07/01/2021 - 07/01/2022			
8742-000	0	.26	\$.00
7520-000	366,863	2.14	\$7,851.00
8810-000	195,494	.13	\$254.00

## **Total Manual Premium:** \$8,105.00

PREMIUM CALCULATION DETAIL	ТҮРЕ	FACTOR	AMOUNT
07/01/2021 - 07/01/2022	Total Manual Premium		\$8,105.00
	Employers Liability Limits	.011	\$89.00
	Employers Liability Increased Limits Balance to Minimum Premium		\$31.00
NET	Total Subject Premium		\$8,225.00
	Experience Modification Premium	.830	-\$1,398.00
	Total Modified Premium		\$6,827.00
	Schedule Rating Premium	.800	-\$1,365.00
Final Estimate	Total Standard Premium		\$5,462.00
	Premium Discount		-\$50.00
	Expense Constant		\$260.00
	Terrorism Charge		\$56.00
	Catastrophe Charge		\$56.00



PREMIUM CALCULATION DETAIL	ТҮРЕ	FACTOR	AMOUNT
	Estimated Annual Premium		\$5,784.00
	Kentucky Special Fund Assessment		\$406.04
	Total Premium & Assessment		\$6,190.04

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, 2022



Green Taylor Water District PO Box 218 Greensburg, KY 42743

#### INFORMATION PAGES FOR POLICY NUMBER – **376063** KEMI 007

1. Policyholder:

Green Taylor Water District PO Box 218

Greensburg, KY 42743

Federal ID: 610662066 Entity type: Municipality

2. Policy Period:

Effective:

Expires:

12:01 AM

07/01/2022

12:01 AM

07/01/2023

#### 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	\$1,000,000	each accident
Bodily Injury by Disease	\$1,000,000	policy limit
Bodily Injury by Disease	\$1,000,000	each employee



This policy includes these endorsements:

ENDORSEMENT CODE	ENDORSEMENT DESCRIPTION
KEMI 001 03	Special Fund Assessment
KEMI 002 03	Schedule of Additional Locations
KEMI 012 02	Premium Discount Endorsement
KEMI 014 04	Experience Modification Endorsement
KEMI_044_06	Terrorism Risk Insurance Program reauthorization Act Disclosure
	Endorsement
KEMI_045_05	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
8742-000	Salesmen Collectors or Messengers - Outside
8810-000	Clerical Office Employees NOC

CLASS RATING AND MANUAL PREMIUM DETAIL	EXPOSURE	RATE	PREMIUM
Green Taylor Water District			
07/01/2022 - 07/01/2023			
8810-000	145,786	.13	\$190.00
8742-000	17,900	.25	\$45.00
7520-000	370,021	1.95	\$7,215.00

**Total Manual Premium:** \$7,450.00

PREMIUM CALCULATION DETAIL	ТҮРЕ	FACTOR	AMOUNT
07/01/2022 - 07/01/2023	Total Manual Premium		\$7,450.00
	Employers Liability Limits	.011	\$82.00
	Employers Liability Increased Limits Balance to Minimum Premium		\$38.00
	Total Subject Premium		\$7,570.00
	Experience Modification Premium	.860	-\$1,060.00
	Total Modified Premium		\$6,510.00
	Schedule Rating Premium	.800	-\$1,302.00
Final Estimate	Total Standard Premium		\$5,208.00
	Premium Discount		-\$23.00
	Expense Constant		\$260.00
	Terrorism Charge		\$53.00
	Catastrophe Charge		\$53.00



PREMIUM CALCULATION DETAIL	ТҮРЕ	FACTOR	AMOUNT
	Estimated Annual Premium		\$5,551.00
	Kentucky Special Fund Assessment		\$385.24
	Total Premium & Assessment		\$5,936.24

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.