# KACo All Lines Fund Statement of Values 11/9/2023 **Kentucky Association of Counties**

North Mercer Water District

Summary of Coverage

Member Number 0217

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Coverage			Deductible
General Liability (Per OCC/AGG)	1,000,000	3,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Ommissions (Per OCC/AGG)	1,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG) Retroactive Date: 07/01/2004	1,000,000	3,000,000	1,000
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500
Auto Liability (CSL)	1,000,000	AND MARKET CO. TO COMPANY TO A MARKET COMPANY TO A MARKET CO. TO CO.	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	See Policy
Crime (Other than Employee Dishonesty)	150,000		500
Employee Dishonesty	150,000		250
Legal Defense Coverage	50,000	ALTO THE CALL OF T	O CONTRACTOR AND ADDRESS OF THE PROPERTY OF TH

## **Kentucky Association of Counties All Lines Fund**

400 Englewood Drive Frankfort, KY 40601 **Declarations Page** 

Policy Number P&C0217
Insured Name and Address

North Mercer Water District PO Box 79 Salvisa, KY 40372 Policy Period: 7/1/2023 to 7/1/2024 For customer service please call

(800)264-5226

Issued:

06/01/2023

**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)	1,000,000	3,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Ommissions (Per OCC/AGG)	1,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG) Retroactive Date: 07/01/2004	1,000,000	3,000,000	1,000
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500
Auto Liability (CSL)	1,000,000	organ/ammigraphonomings/v46th/S2PMy decimination (Annies Medicinistic Annies and Annies and Annies A	O
Auto Comprehensive	ACV	and a manufact of a his house of Andrew (Aggregate of Aggregate of Agg	500
Auto Collision	ACV	enter of the second section of the first of the character of the second section of the section of the second section of the second section of the second section of the section of the second section of the section	500
P.I.P. (No Fault)	10,000	had fold through of Manufacture (Manufacture American Control of Manufacture Control of Manufacture American Manufacture Control of Manufacture American Manufacture Control of Manufac	Q
Under Insured/Un-Insured	60,000	60,000	0
Non Owned Auto Coverage	Primary	The second secon	The second state of the se
Property/Buildings	As Per Statement on File	and the second s	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)	1,000,000	1,000,000	0
Earthquake	See Policy	See Policy	See Policy
Crime (Other than Employee Dishonesty)	150,000	anner a neueron amende gregogou menemen er menemen en en de	500
Employee Dishonesty	150,000	The state of the s	250
Legal Defense Coverage	50,000	то на совтои технология и домов (1 м. 10 °C 2000 в 1 м. 10 °C 10	0

Authorized			
Representative	7 Jus Dann	Date	6/1/2023
	7		

#### **Summary of Coverage Updates**

#### Cyber Liability

- Despite a difficult and changing cyber market, we are still able to provide cyber coverage to you at no additional charge. The coverage limit will remain unchanged at a \$1 million per member subject to a \$10 million-dollar aggregate limit for KALF as a whole.
- New sub-limits have been added as follows:

Coverage Line	<u>Sublimit</u>
Privacy Response	\$500,000
Regulatory Fines and Penalties	\$500,000
PCI DSS Assessments	\$500,000
Network Interruption/Electronic Equipment/Electronic Data	\$250,000

#### **General Liability**

Language has been added which follows the industry trend to exclude claims related to
polyfluoroalkyl substances which are "forever chemicals" used in some products and linked
to various cancers, birth defects, kidney disease and other health concerns.

#### **Property**

- Due to reinsurance changes, a deductible has been added to the earthquake coverage for all members located in the New Madrid Zone (Ballard, Caldwell, Calloway, Carlisle, Crittenden, Fulton, Graves, Henderson, Hickman, Hopkins, Livingston, Lyon, Marshall, McCracken, Trigg, Union and Webster counties) which is equal to 2% of the value of the insured property.
- Language has been added to clarify the exclusion for landfill original material (i.e. trash and debris), landfill liners or similar landfill barrier(s), natural or manmade.

#### KACo Workers Compensation Fund - Payroll Audit

Member Name: North Mercer Water District

Member #:

0553

Policy Number: WC2022-0553

Policy Period:

7/1/2022 - 7/1/2023

Coverage administered under: KACo Workers Compensation

In the State of: KY

Class	Class Description		Coverage	Estimated Payroll		Estimated Premium	Actual Payroll	Actual Premium
7520	Waterworks opera	itions & drivers	3.93	\$325,000	0 \$	12,772.50	\$357,044	\$14,031.83
8742	Professional Empl	oyees	0.48	\$30,000	0	\$144.00	\$27,800	\$133.44
8810	Clerical office emp	oloyees	0.23	\$225,000	0	\$517.50	\$232,664	\$535.13
			Subtotal for	r Classes		\$13,4	34.00	\$14,700.40
			Prorata Adj	justment	1.0000	13,4	34.00	14,700.00
			Experience	Modifier	0.8800	(1,6	12.00)	(1,764.00)
Invoid	ce Number:	P220037	Schedule (	Credits	0.6700	(3,90	01.00)	(4,269.00)
Invoid	ce Date:	10/11/2023	Premium D	iscounts:			0.00	0.00
Invoid	ce Due Date:	02/29/2024						
		02/20/2021	Premium S	Subtotal		7,9	921.00	8,667.00
Please	e remit payment with	a copy of this invoice to:	Minimum F	Premium		(	350.00	350.00
			Tax Fund			į	550.00	601.00
	O Workers Comp		Total Annu	ıal		\$8,4	471.00	\$9,268.00
0.00	Englewood Drive fort, KY 40601		Premium					
				Α	dditiona	al Premiun	n Due	\$797.00

Please note: Effective March 1, 2024, any outstanding balance due on this premium will accrue a compounding monthly interest charge of 0.5% (minimum \$5 charge). To make certain no interest is charged, be sure to make full payment visibly postmarked no later than February 29, 2024.

PC 10-30-23 Cht 13377

<sup>\*</sup> If you have any questions, please call 1-800-264-5226



#### Invoice

Kentucky Association of Counties All Lines Fund

400 Englewood Drive Frankfort, KY 40601 Tel: 1-800-264-5226

Fax: 1-502-875-8240

**Invoice Number** 

K230629

**Invoice Date** 

06/01/2023

**Due Date** 

08/01/2023

Insured Name and Address

Member Number

0217

North Mercer Water District

PO Box 79

Salvisa, KY 40372

Contact(s)

First Name Mischell Last Name

Lee

Title

Manager

Telephone (859)865-2292

<u>Fax</u>

(859)865-4572

**Email** 

mlee@northmercerwater.org

Invoice Detail

Effective Date

Description

07/01/2023

Annual Premium for 2023-2024 Policy Renewal

5

**Premium** \$35,339.00

\*35,339.00

**Total Due** 

\$35,339.00

Sayment Options:

Option 1: Save 1%; pay \$34,985.61 by due date

Option 2: Pay 50% by due date; and 3 subsequent equal monthly payments 50 % = \$17,669.51 plus 3 monthly payments of \$5,889.83

7-13-23

M# 18040

Please Note: Effective January 1, 2024, 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, 2023.

### KACo WORKERS COMPENSATION FUND

400 Englewood Drive Frankfort, KY 40601 1-800-264-5226

#### CERTIFICATE OF WORKERS COMPENSATION COVERAGE

ITEM 1 -	Name and Address of Insured:
	North Mercer Water District
	PO Box 79
	Salvisa, KY 40372

ITEM 2 -

Certificate Number:

WC2023-0553

ITEM 3 -

KACO W/C-4

Effective Date: Saturday, July 01, 2023

Expiration Date: Monday, July 01, 2024

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:

\$8,261.00

**ITEM 7-**

Special Fund Tax:

\$573.00

ITEM 8-

**TOTAL PREMIUM:\*** 

\$8,834.00

ITEM 9-

Payment Options:

(1) Full payment by 8/1/2023. 1% discount applied = \$8,745.66

(2) 50% payment by 8/1/2023 and 3 subsequent equal monthly pmts. on balance.

50% = \$4,417.01 Plus 3 monthly payments of \$1,472.33

Please Note: Effective January 1, 2024 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, 2023

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 1st day of June, 2023

Kris Dunn, Associate Director of Insurance

KACo

Making Workers Comp Work in Kentucky

<sup>\*</sup> An invoice accompanies this declaration for the total amount due.

## Carpenter Warren Insurance Agency, Inc.

Established 1927

271 W SHORT ST, SUITE 304 271 West Short Street, Suite 304 Lexington. Kv. 40507 (859) 252-6691

To North Mercer Water District Board of Commissioners PO Box 79 Salvisa, KY 40372 INVOICE DATE:

2/10/2023

PROVIDING CO.

OHIO CASUALTY CO

**POLICY NUMBER** 

LSF033455

COVERAGE FROM	COVERAGE TO		Premium Due	CREDIT	AMOUNT
02/10/2023	02/10/2024	ENCROACHMENT BOND	As Per Policy	, (	101.80
		Payment Schedule	617	215-7 215-7	3 17589
		ANNUAL			

PAYMENT DUE on effective date. Please remit to Carpenter-Warren Insurance Agency Inc., above address.

1.5% PER MONTH INTEREST CHARGE (18% PER ANNUM)

WE TRUST YOU WILL FIND THE ABOVE ISSUED IN PROPER FORM. HOWEVER IF ANY CHANGES ARE NECESSARY, PLEASE ADVISE. YOUR BUSINESS IS SINCERELY APPRECIATED.

**Balance Due** 

\$101.80

# Kentucky Association of Counties KACo All Lines Fund Statement of Values

North Mercer Water District

Summary of Coverage

Member Number 0217

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General Liability (Per OCC/AGG)	1,000,000	3,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Ommissions (Per OCC/AGG)	1,000,000	3,000,000	1,000
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Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500
Auto Liability (CSL)	1,000,000		0
Auto Comprehensive	ACV		500
Auto Collision	ACV		500
P.J.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	PRESENTATION OF THE PROPERTY O	0

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**POLICY NUMBER** 

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02/10/2023	02/10/2024	ENCROACHMENT BOND	As Per Policy	j	101.80
			(e) 9	2.15-2	3 17589
		Payment Schedule ANNUAL			

PAYMENT DUE on effective date. Please remit to Carpenter-Warren Insurance Agency Inc., above address.

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Balance Due

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### 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:	
	North Mercer Water District	
	PO Box 79	
	Salvisa, KY 40372	
ITEM 2 -	Certificate Number: WC2022-0553	
ITEM 3 -	Effective Date: Friday, July 01, 2022	Expiration Date: Saturday, July 01, 2023
	12:01 A.M., standard time at the address of Cancellation Notice: 60 Days - Pursuant to	
ITEM 4 -	Coverage under this Certificate applies to the Kent	acky Workers Compensation Law. (KRS 342)
ITEM 5 -	Company's Limit of Indemnity Each Occurrence:	W.
	(a) For Workers Compensation:	Statutory
	(b) For Employers Liability:	\$2,500,000
ITEM 6 -	Workers Compensation Premium:	\$7.921.00
ITEM 7 -	Special Fund Tax:	\$550.00
ITEM 8 -	TOTAL PREMIUM:*	\$8,471.00
ITEM 9 -	Payment Options:	$\sim$ 0
	(1) Full payment by 8/1/2022. 1% discount app	ned = \$8,386.29
	(2) 50% payment by 8/1/2022 and 3 subsequen	equal monthly pmts. on balance.
	50% = \$4,235.51 Plus 3 monthly payment	of \$1,411.83
	January 1, 2023 any outstanding balance due on this pren To make certain no interest is charged, be sure to make	

\* 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



#### **Invoice**

Kentucky Association of Counties All Lines Fund

400 Englewood Drive Frankfort, KY 40601 Tel: 1-800-264-5226

Fax: 1-502-875-8240

Invoice Number

K220452

Invoice Date

05/25/2022

**Due Date** 

08/01/2022

Insured Name and Address

Member Number

0217

North Mercer Water District

PO Box 79

Salvisa, KY 40372

657

Contact(s)

First Name Mischell Last Name

Lee

<u>Title</u> Manager <u>Telephone</u> (859)865-2292

Fax

<u>Email</u>

(859)865-4572

mlee@northmercerwater.org

Invoice Detail

Effective Date

**Description** 

07/01/2022 Annual Premium for 2022-2023 Policy Renewal

Premium \$30,434.00 **Amount Due** \$30,434.00

**Total Due** 

\$30,434.00

Payment Options:

Option 1: Save 1%; pay \$30,129.66 by due date

Option 2: Pay 50% by due date; and 3 subsequent equal monthly payments

50 % = \$15,217.01 plus 3 monthly payments of \$5,072.33

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.

P2-10-22 Cht 16903



KACo Unemployment Insurance Fund 400 Englewood Drive Frankfort, KY 40601 (502) 223-7667

BILL TO	
North Mercer Water District	
PO Box 79	
Salvisa KY 40372-0079	

DATE	INVOICE #
2/23/2022	CY22320

657

DESCRIPTION		PREMIUM	<b>TOTAL DUE</b>
2022 Unemployment Insurance Premium		269.50	269.50
Discount		-10.00%	-26.95
.35% for calendar year 2022			
		27	
	7	TOTAL	\$242.55
	•)	7U2 7U1	
		1021	

10% discount is available if paid by July 31, 2022.

Please make check payable to KACo UI Fund. Return one copy of this invoice with payment.

## Carpenter Warren Insurance Agency, Inc.

Established 1927

271 W SHORT ST, SUITE 304 271 West Short Street, Suite 304 Lexington. Kv. 40507 (859) 252-6691

To North Mercer Water District Board of Commissioners PO Box 79 Salvisa, KY 40372 INVOICE DATE:

2/10/2022

PROVIDING CO.

OHIO CASUALTY CO

POLICY NUMBER

LSF033455

COVERAGE FROM	COVERAGE TO			Premium Due	CREDIT	AMOUNT
02/10/2022	02/10/2023	ENCROACHMENT BOND		As Per Policy		101.80
					in cold	Commussion
		Payment Schedule				
		ANNUAL	30	1-20.		

PAYMENT DUE on effective date. Please remit to Carpenter-Warren Insurance Agency Inc., above address.

1.5% PER MONTH INTEREST CHARGE (18% PER ANNUM)

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**Balance Due** 

\$101.80