Kentucky Association of Counties All Lines Fund

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

Policy Number P&C3280 Insured Name and Address

Cunningham Water District PO Box 644 7506 Hwy 62 Cunningham, KY 42035 Policy Period: 7/1/2021 to 7/1/2022 For customer service please call

(800)264-5226

Issued:

06/01/2021

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)	3,000,000	5,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Ommissions (Per OCC/AGG)	3,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG)	NCD	NCD	NCD
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	1,000,000	1,000,000	2,500
Auto Liability (CSL)	3,000,000		0
Auto Comprehensive	Hired/Non-Owned		500
Auto Collision	Hired/Non-Owned		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	25,000
Crime (Other than Employee Dishonesty)	NCD		NCD
Employee Dishonesty	NCD		NCD
Legal Defense Coverage	50,000		0

Authorized
Representative

King Dann

Date 6/1/2021



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

K210215

Invoice Date

05/31/2021

Due Date

08/01/2021

Insured Name and Address

Member Number

3280

Cunningham Water District

PO Box 644 7506 Hwy 62 Cunningham, KY 42035

Contact(s)

First Name

Dan

Casey

Last Name

Bowles Brown

Title

Telephone

Fax

Email

cfd@wk.net

Chairman

(270)562-0299

Invoice Detail

Effective Date 07/01/2021

Description

Annual Premium for 2021-2022 Policy Renewal

Premium

Amount Due

\$1,525.00

\$1,525.00

Total Due

\$1,525.00

Payment Options:

Option 1: Save 1%; pay \$1,509.75 by due date

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

50 % = \$762.49 plus 3 monthly payments of \$254.17

Please Note: Effective January 1, 2022, 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, 2021.

Pd Ch# 4898 6/16/21

Servicing Agency Kentucky Association of Counties All Lines Fund 1-800-264-5226

For claims service please call: 1-866-367-5226

Please return a copy of this invoice with your payment

Kentucky Association of Counties All Lines Fund

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

Policy Number P&C3280 Insured Name and Address

Cunningham Water District PO Box 644 7506 Hwy 62 Cunningham, KY 42035 Policy Period: 7/1/2022 to 7/1/2023 For customer service please call

(800)264-5226

Issued:

05/26/2022

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)	3,000,000	5,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Ommissions (Per OCC/AGG)	3,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG)	NCD	NCD	NCD
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500
Auto Liability (CSL)	3,000,000		0
Auto Comprehensive	Hired/Non-Owned		500
Auto Collision	Hired/Non-Owned		500
P.I.P. (No Fault)	10,000		0
Under Insured/Un-Insured	60,000		0
Non Owned Auto Coverage	Primary		The state of the s
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)	NCD		NCD
Employee Dishonesty	NCD		NCD
Legal Defense Coverage	50,000		0

Authorized Representative Kris Dann

Date 5/26/2022



Invoice

16-38-3033

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

K220028

Invoice Date

05/25/2022

Due Date

08/01/2022

Insured Name and Address

Member Number

3280

Cunningham Water District

PO Box 644 7506 Hwy 62

Cunningham, KY 42035

Contact(s)

First Name

Billy

Carissa

Last Name

Viniard

Viniard

Title

Telepho

Telephone (270)836-9040

(270)836-9040

Fax

Email

cunninghamwaterdistrict@gmail.

com

cunninghamwaterdistrict@gmail.

com

Invoice Detail

Effective Date L

Description

07/01/2022

Annual Premium for 2022-2023 Policy Renewal

Premium

Amount Due

\$1,563.00

\$1,563.00

Total Due

\$1,563.00

Payment Options:

Option 1: Save 1%; pay \$1,547.37 by due date

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

50 % = \$781.50 plus 3 monthly payments of \$260.50

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.

Servicing Agency Kentucky Association of Counties All Lines Fund 1-800-264-5226 For claims service please call: 1-866-367-5226

Please return a copy of this invoice with your payment

Kentucky Association of Counties All Lines Fund

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

Policy Number P&C3280 Insured Name and Address

Cunningham Water District PO Box 644 7506 Hwy 62 Cunningham, KY 42035 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)	3,000,000	5,000,000	0
Law Enforcement (Per OCC/AGG)	NCD	NCD	NCD
Errors/Ommissions (Per OCC/AGG)	3,000,000	3,000,000	1,000
Employment Practices (Per claim / AGG)	NCD	NCD	NCD
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500
Auto Liability (CSL)	3,000,000		0
Auto Comprehensive	Hired/Non-Owned		500
Auto Collision	Hired/Non-Owned		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)	1,000,000	1,000,000	0
Earthquake	See Policy	See Policy	See Policy
Crime (Other than Employee Dishonesty)	NCD		NCD
Employee Dishonesty	NCD		NCD
Legal Defense Coverage	50,000		0

Authorized	
Representative	

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Tru	1)ann
1 9 5	10010.

Date 6/1/2023



Invoice

Invoice Date

Due Date

K230271

06/01/2023

08/01/2023

Fax: 1-502-875-8240

400 Englewood Drive

Frankfort, KY 40601 Tel: 1-800-264-5226

Insured Name and Address

Member Number

3280

Cunningham Water District

Kentucky Association of Counties All Lines Fund

PO Box 644 7506 Hwy 62

Cunningham, KY 42035

Contact(s)

First Name

Billy

Carissa

Last Name

Viniard

Viniard

Title

Telephone

(270)836-9040

Fax

Email

(270)836-9040

cunninghamwaterdistrict@gmail.

cunninghamwaterdistrict@gmail.

com

Invoice Detail

Effective Date

Description

07/01/2023

Annual Premium for 2023-2024 Policy Renewal

Premium \$1,842.00

Amount Due

Total Due

\$1,842.00

\$1,842.00

Payment Options:

Option 1: Save 1%; pay \$1,823.58 by due date

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

50 % = \$921.00 plus 3 monthly payments of \$307.00

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.

Servicing Agency

Kentucky Association of Counties All Lines Fund

1-800-264-5226

For claims service please call: 1-866-367-5226

Please return a conv of this invoice with your navment