

Invoice

Kentucky Association of Countles All Lines Fund

400 Englewood Drive Frankfort, KY 40601 Tel: 1-800-264-5226 Fax: 1-502-875-8240 **Invoice Number**

K230620

Invoice Date

06/01/2023

Due Date

08/01/2023

Insured Name and Address

Member Number

0934

Lyon County Water District PO Box 489 Kuttawa, KY 42055

Contact(s)

First Name

Last Name

Title

<u>Telephone</u>

Fax

<u>Email</u>

Lillali

Blane

Mathews

Superintendent

(270)388-0271

(270)388-9825

lyoncowater@gmail.com

Invoice Detail

Effective Date 07/01/2023

Description

Annual

Annual Premium for 2023-2024 Policy Renewal

Premium \$20,621.00 \$20,621.00

Total Due

\$20,621.00

Payment Options:

Option 1: Save 1%; pay \$20,414.79 by due date

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

50 % = \$10,310.51 plus 3 monthly payments of \$3,436.83

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.

Kentucky Association of Counties All Lines Fund

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

Policy Number P&C0934
Insured Name and Address

Policy Period: 7/1/2023 to 7/1/2024
For customer service please call

Lyon County Water District PO Box 489 Kuttawa, KY 42055 (800)264-5226

Issued:

06/05/2023

Business Description

Utilities

Agent: Peel & Holland Insurance

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) Retroactive Date: 07/01/2004	3,000,000	3,000,000	1,000	
Cyber Liability (Per claim / AGG) Retroactive Date: 07/01/2015	See Policy	See Policy	2,500	
Auto Liability (CSL)	3,000,000		0	
Auto Comprehensive	ACV		500	
Auto Collision	ACV		500	
P.I.P. (No Fault)	10,000		0	
Under Insured/Un-Insured	60,000	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	1,000,000	1,000,000	0	
Earthquake	See Policy	See Policy	See Policy	
Crime (Other than Employee Dishonesty)	150,000		500	
Employee Dishonesty (Policy #: CIC1964)	150,000		250	
Legal Defense Coverage	50,000		0	

Authorized	· 1				
Representative	7 Jus	Junn	I	Date	6/5/2023
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