

	2016-17 Rate	2017-18 Rate	2018-19 Rate	2019-20 Rate	2020-21 Rate	2021-22 Rate	2022-23 Rate	2023-24 Rate	2024-25 Rate	2025-26 Rate
<b>Liberty Mutual</b>										
<b>Property</b>	\$89,154	\$91,549	\$97,860	\$108,065	\$108,723	\$124,556	\$150,381	\$239,571	\$259,530	\$282,955
<b>General Liability</b>	\$51,763	\$52,092	\$58,407	\$60,697	\$78,563	\$78,866	\$80,291	\$92,945	\$112,718	\$142,974
<b>Automobile</b>	\$60,147	\$63,790	\$66,965	\$74,993	\$84,612	\$89,506	\$94,313	\$93,849	\$104,880	\$112,489
<b>Umbrella</b>	\$16,176	\$16,732	\$18,814	\$20,347	\$24,533	\$29,059	\$31,384	\$35,860	\$29,045	\$40,452
<b>Total with Liberty only</b>	\$217,240	\$224,163	\$242,046	\$264,102	\$296,431	\$321,987	\$356,369	\$462,225	\$506,173	\$578,870
<b>Kentucky Employers Mutual (KEMI)</b>										
<b>Worker's Compensation</b>	\$125,704	\$130,719	\$105,470	\$88,055	\$80,931	\$74,483	\$72,961	\$65,198	\$47,304	\$53,129
<b>Total with Liberty/KEMI</b>	\$342,944	\$354,882	\$347,516	\$352,157	\$377,362	\$396,470	\$429,330	\$527,423	\$553,477	\$631,999

# Summary

Line of Coverage	Effective Date	Rating Plan	Underwriting Company	Pay Plan	Estimated Premium*
Commercial Auto	07/01/2025 - 07/01/2026	Guaranteed Cost	Liberty Mutual Fire Insurance Company	Annual 100%/0	\$112,489
General Liability	07/01/2025 - 07/01/2026	Guaranteed Cost	Liberty Mutual Fire Insurance Company	Annual 100%/0	\$82,035
School Leaders Errors Omissions	07/01/2025 - 07/01/2026	Guaranteed Cost	Liberty Mutual Fire Insurance Company	Annual 100%/0	\$59,878
Law Enforcement Liability	07/01/2025 - 07/01/2026	Guaranteed Cost	Liberty Mutual Fire Insurance Company	Annual 100%/0	\$1,061
Property	07/01/2025 - 07/01/2026	Guaranteed Cost	Liberty Mutual Fire Insurance Company	Annual 100%/0	\$282,955
Umbrella	07/01/2025 - 07/01/2026	Guaranteed Cost	Liberty Insurance Corporation	Annual 100%/0	\$40,452
<b>Total Estimated Premium</b>					<b>\$578,870</b>

\*Estimated premium includes Terrorism Risk Insurance Act (TRIA) premium, taxes, assessments and surcharges.

This proposal may vary from your original request for coverage. Please review the proposal carefully for any variances. The terms, conditions and premiums included in this proposal contemplate the sale or renewal of all the quoted insurance lines. Electing to buy or renew only some of the lines of coverage may result in changes to the terms, conditions and premiums of the remaining insurance lines.

## Payment Terms:

- Commissions will be paid in accordance with the payment plans established for the customer.
- Mid-Term premium endorsements will be: **Bill Now - Outside Payment Plan**
- **Producer** will be billed for premium, taxes, assessments, and surcharges.
- Pay Terms Offered: **Non-ACH**



April 11, 2025

Mercer County School District  
530 Perryville St  
Harrodsburg, KY 40330

**Kentucky Employers Mutual Insurance**  
**250 W Main Street, Suite 900**  
**Lexington, KY 40507**  
[www.kemi.com](http://www.kemi.com)  
**859-425-7800 / 800-640-5364**

Quote Date: April 11, 2025

Prospective Insured:  
Name Mercer County School District  
Address 530 Perryville St  
City Harrodsburg, KY 40330

Legal Entity: School Board  
FEIN: 616001291

Agency: Whitenack & Souder Insurance Agency  
Agent Number: 258  
Address: 204 S Main St  
City: Harrodsburg, KY 40330  
Phone (859) 734-4358

Renewal Quote for Workers Compensation Coverage  
Renewal Quote Number : 01417975/ 00

Proposed Effective Date: 07/01/2025 Proposed Expiration Date: 07/01/2026

Employer's Liability Limits: (3.B)	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

Quote Date: April 11, 2025

Quote for Workers Compensation Coverage Quote Number : 01417975/00
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7380-000	Drivers Chauffeurs & Their Helpers NOC - Commercial
8868-000	College: Professional Employees & Clerical
9101-000	College: All Other Employees

	EXPOSURE	RATE	PREMIUM
Mercer County School District			
07/01/2025 - 07/01/2026			
7380-000	1,073,309	3.59	\$38,532.00
8868-000	16,341,402	.2	\$32,683.00
9101-000	1,334,513	1.64	\$21,886.00

	TYPE	FACTOR	AMOUNT
07/01/2025 - 07/01/2026	Total Manual Premium		\$93,101.00
	Employers Liability Limits	.011	\$1,024.00
	Total Subject Premium		\$94,125.00
	Experience Modification Premium	.840	-\$15,060.00
	Total Modified Premium		\$79,065.00
	Schedule Rating Premium	.650	-\$27,673.00
Final Estimate	Total Standard Premium		\$51,392.00
	Premium Discount		-\$5,057.00
	Expense Constant		\$260.00
	Terrorism Charge		\$1,875.00
	Catastrophe Charge		\$1,875.00
	Estimated Annual Premium		\$50,345.00
	Kentucky Special Fund Assessment		\$2,784.08
	Total Amount Due		\$53,129.08

TOTAL ESTIMATED ANNUAL POLICY PREMIUM **\$53,129.08**

Payment Plan Eligibility: Annual Plan

**Required Initial Installment Premium: \$53,129.08**

BILL DATE	BILL AMOUNT
05/27/2025	\$53,129.08

**This renewal quotation is based on the information provided by the expiring policy. Any changes in this information unknown at the time of this quotation could change the policy premium. Please notify underwriting of any and all changes.**

cc: Whitenack & Souder Insurance Agency