



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
06/11/2019

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY State Farm CAMILLE LOGOTHETIS 2735 HASSERT BLVD STE 183 NAPERVILLE, IL 60564		PHONE (A/C, No, Ext): 630-904-4400	COMPANY State Farm Fire and Casualty Company		NAIC # 25143
FAX (A/C, No): 630-904-4404	E-MAIL ADDRESS: SHARON.DANIELSON.QG9S@STATE				
CODE: 13-3714	SUB CODE:				
AGENCY CUSTOMER ID #:					
INSURED NAPERVILLE SWEET SHOPS, INC. 36 W JEFFERSON AVE NAPERVILLE, IL 60564			LOAN NUMBER	POLICY NUMBER 93-G9-F579-9	
			EFFECTIVE DATE 01/05/2019	EXPIRATION DATE 01/05/2020	<input checked="" type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:					

PROPERTY INFORMATION

LOCATION/DESCRIPTION 36 W JEFFERSON AVE NAPERVILLE, IL 60564
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THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

PERILS INSURED	<input type="checkbox"/>	BASIC	<input type="checkbox"/>	BROAD	<input type="checkbox"/>	SPECIAL	<input type="checkbox"/>
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COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Premise:		
Building Betterments & Improvements	185,000	1000.00
Business Personal Property	205,000	1000.00
Spoilage due to breakdown/contamination/power out	15,000	1000.00
Replacement Cost Basis Agreed Value with Coinsurance Suspended Special Coverage Form 30 Day Notice of Cancellation Loss of Business Income & Extra Expense		
Actual Loss Sustained	12 MONTHS	
Flood Coverage - Required if located in Federally Designated Flood Plain		
Wind and Hail Coverage-Separate Policy if excluded on Betterment/BPP & BI/EE coverage		

REMARKS (Including Special Conditions)

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CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS KILWINS CHOCOLATES FRANCHISE INC. & KILWIN'S QUALITY CONFECTIONS INC. 1050 BAY VIEW ROAD PETOSKEY MI 49770	<input checked="" type="checkbox"/> ADDITIONAL INSURED	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE
	<input type="checkbox"/> MORTGAGEE	LOAN #	
AUTHORIZED REPRESENTATIVE <i>Sharon Danielson</i>			