

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/30/2019

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	SUBROGATION IS WAIVED, Subject is certificate does not confer rights to				ıch end	dorsement(s)		equire an endorsement	. A St	atement on	
PRODUCER						CONTACT NAME: Becky Hart					
Olivier-VanDyk Insurance Agency 2780 44th Street SW Wyoming MI 49519					PHONE (A/C, No, Ext): 616-454-0800 FAX (A/C, No): 616-454-7100						
					E-MAIL ADDRESS: beckyh@ovdinsurance.com						
						INSURER(S) AFFORDING COVERAGE					
						INSURER A: Selective Insurance Company				12572	
INSURED CLEAFUN-01 Clearly Fun Confections, LLC					INSURER B:						
736 North Reeve Rd					INSURER C:						
Saint Helena Island SC 29920					INSURER D:						
					INSURER E :						
					INSURER F:						
				NUMBER: 765010478				REVISION NUMBER:			
THIS IS TO CERTIFY THAT 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 CERTIFICATE 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.										WHICH THIS	
INSR LTR	NSR LTR TYPE OF INSURANCE		ADDL SUBR INSD WVD POLICY NUMBER			POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY)		LIMITS			
Α	X COMMERCIAL GENERAL LIABILITY			S 2345495		7/1/2019	7/1/2020	EACH OCCURRENCE \$1,000		,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,0	00	
								MED EXP (Any one person)	\$ 10,00	0	
								PERSONAL & ADV INJURY	\$ 1,000	,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$3,000	,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$3,000	,000	
	OTHER:								\$		
Α	AUTOMOBILE LIABILITY			S 2345495		7/1/2019	7/1/2020	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	,000	
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS NON-OWNED								\$		
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
Α	X UMBRELLA LIAB X OCCUR			S 2345495		7/1/2019	7/1/2020	EACH OCCURRENCE	\$ 1,000	,000	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 1,000	,000	
_	DED RETENTION \$ WORKERS COMPENSATION			1410 0005111		4444040040	4444040040	V PER OTH-	\$		
A	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under			WC 9085111		11/19/2018	11/19/2019	X PER OTH- STATUTE ER			
								,		,000	
								E.L. DISEASE - EA EMPLOYEE \$1			
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 1,000	,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Location: 808 Bay St, Beaufort, SC 29902 Kilwins Chocolates Franchise Inc. and Kilwins Quality Confections Inc. are additional insured on a primary & non-contributory basis with regards to general liability, auto liability and umbrella. Waiver of subrogation applies to workers' compensation, general liability, auto liability and umbrella. A 30 day notice of cancellation applies.											
<u></u>	TIEICATE HOLDER		CANO	CANCELLATION							
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI 49770						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. AUTHORIZED REPRESENTATIVE					