

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 1/19/2018

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.

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AGENCY PHONE (A/C, No, Ext): (877)744-3125			COMPANY					
Selective Insurance Company of America			Selective Insurance Co of SC					
P.O. Box 13325			40 Wantage Ave					
Richmond VA 23225-0325			Branchville NJ 07890					
FAX (A/C, No): ⁽⁸⁷⁷⁾³⁷⁸⁻³⁰³³	E-MAIL ADDRESS:	servicecenter@selective.						
CODE: SVCTR00000		SUB CODE: 0021040						
AGENCY CUSTOMER ID #: 00100644	1							
INSURED			LOAN NUMBER			POLICY NUMBER		
BARMAR OF NORTH CAROLINA, INC DBA KILWINS					s	2047605		
3925 SPRINGLAKE CT		EFFECTIVE DATE	EXPIRATION DATE		CONTINUED UNTIL			
			11/8/2017	11/8/2018		X TERMINATED IF CHECKED		
CLEMMONS NC 27012-9161			THIS REPLACES PRIOR EVIDENCE DATED:					
PROPERTY INFORMATION	ON	_	_			-		

LOCATION/DESCRIPTION Loc# 00001/Bldg# 00001 308A S STRATFORD RD WINSTON SALEM, NC 27103

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

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Business Personal Property, Special form including theft,	205,000	1,000
Replacement Cost Value		
Tenants Improvements and Betterments, Special for including theft,	195,487	1,000
Replacement Cost Value		
Spoilage due to breakdown/contamination/power outage	\$25,000	1,000
Business Income & Extra Expense - ALS	18 Months	N/A

REMARKS (Including Special Conditions)

Notice of Cancellation will be provided per the provisions of attached form IL 79 90.

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							
·		MORTGAGEE	Х	ADDITIONAL INSURED			
KILWIN'S CHOCOLATES FRANCHISE, INC.		LOSS PAYEE					
1050 BAY VIEW ROAD	LOA	N#					
PETOSKEY, MI 49770							
	AUTHORIZED REPRESENTATIVE						
	Bol	o Degroat/SH		Rolado			