

**PRODUCER** 

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/01/2021

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).

CONTACT Automatic Data Processing Insurance Agency, Inc.

Automatic Data Processing Insurance Agency, Inc.							PHONE (A/C, No, Ext): 1-800-524-7024 FAX (A/C, No):					
						E-MAIL ADDRESS:						
1 Adp Boulevard							INSURER(S) AFFORDING COVERAGE					
Roseland NJ 07068							INSURER A: Nutmeg Insurance Company					
INSURED HIGHLY FAVORED CONFECTIONS INC							INSURER B:					
						INSURER C:						
600 E Grand Ave						INSURE	INSURER D :					
						INSURER E :						
		Chicago			IL 606113419	INSURER F:						
CO	/ER	RAGES CER	RTIFICATE NUMBER: 2212047			REVISION NUMBER:						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLI INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO VICERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL TEXTURE OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCEDED AND CAMBO.										WHICH THIS		
INSR LTR	TYPE OF INSURANCE			ADDL SUBR INSD WVD POLICY NUMBER			POLICY EFF (MM/DD/YYYY) POLICY EXP (MM/DD/YYYYY) LIMITS					
		COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$		
		CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
									MED EXP (Any one person)	\$		
									PERSONAL & ADV INJURY	\$		
	GEN	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
		POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$		
		OTHER:								\$		
	AUT	TOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
		ANY AUTO							BODILY INJURY (Per person)	\$		
		OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
		HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
										\$		
		UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
		DED RETENTION \$							\	\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A Y			07/01/2021	07/01/2022	PER OTH- STATUTE ER			
					76WEGAL9KL4				E.L. EACH ACCIDENT	\$ 1,00		
									E.L. DISEASE - EA EMPLOYEE \$ 1,000,00			
									E.L. DISEASE - POLICY LIMIT	\$ 1,00	00,000	
DES	RIPT	TION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORE	0 101, Additional Remarks Schedu	ıle, may b	e attached if mo	re space is requir	ed)			
CE	RTIF	FICATE HOLDER				CANC	CELLATION					
Kilwins Chocolates Franchise, Inc. 1050 Bay View Road							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					
							AUTONIZED REPRESENTATIVE					
		Petoskey			MI 49770	© 1988-2015 ACORD CORPORATION. All rights reserved.						
							© 19	88-2015 AC	ORD CORPORATION.	All righ	nts reserved.	