

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/24/2020

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)

this certificate does not confer rights to				•	•	may require	an endorsemen	i. A State	ment (UII	
PRODUCER					CONTACT Nicole Bird						
John J. Clarke Insurance Inc					I = A V					321-7332	
Citizens Bank Building					E-MAIL Nicole@jjcinsurance.com						
1226 Main St, Ste 1					INSURER(S) AFFORDING COVERAGE						
West Warwick RI 02893					INSURER A: United Ohio Insurance Company					NAIC # 13072	
INSURED					INSURER B:						
The Sailor's Sweet Tooth, Inc, DBA: Kilwins					INSURER C:						
420 Broadway					INSURER D :						
					INSURER E :						
Saratoga Springs NY 12866					INSURER F:						
COVERAGES CERTIFICATE NUMBER: CL20824035					19 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. INDICATE IN POLICY EFF. POLICY EXP.											
INSR LTR TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	3		
COMMERCIAL GENERAL LIABILITY							EACH OCCURRENC		\$ 1,00	00,000	
CLAIMS-MADE X OCCUR							DAMAGE TO RENTE PREMISES (Ea occu	rrence)	\$ 500,	,000	
							MED EXP (Any one p	person) \$ 5,000		00	
A			CPP0032757		06/20/2020	06/20/2021	PERSONAL & ADV II	PERSONAL & ADV INJURY \$ Inclu		uded	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	ATE	φ .	00,000	
POLICY PRO- JECT LOC							PRODUCTS - COMP	1P/OP AGG \$ 2,000,000			
OTHER:							EPLI		\$ 100,	*	
AUTOMOBILE LIABILITY							COMBINED SINGLE (Ea accident)	LIMIT	\$ 1,00	00,000	
ANY AUTO							BODILY INJURY (Per	· · ·			
A OWNED SCHEDULED AUTOS ONLY AUTOS			CPP0032757		06/20/2020	06/20/2021	BODILY INJURY (Per	<u>-</u>			
HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	E	\$		
									\$		
UMBRELLA LIAB OCCUR							EACH OCCURRENC	*ENCE \$ 1,00		00,000	
A EXCESS LIAB CLAIMS-MADE			CX0004518	06/20/2020	06/20/2021	AGGREGATE	\$				
DED RETENTION \$							LDED	LOTU	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER STATUTE	OTH- ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDEN	Т	\$		
(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA E	MPLOYEE	\$		
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLI	CY LIMIT	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLI	ES (AC	ORD 1	01, Additional Remarks Schedule,	may be a	ttached if more sp	pace is required)					
Locations: 262 Thames St, Newport RI 02840 359 Thames St, UnitE Newport RI 02840 Kilwins Chocolaes Franchise, Inc., and Kilwin's Quality Confections Inc. are listed as Additional Insured on a Primary Non-contributory basis with a waiver of surogation in regards to General Liability. Hired and Non-Owned Auto Liability and Umbrella in favor of Kilwins Chocolates Franchise, Inc., and Kilwin's Quality Confections Inc. Umbrella is followed from 30 days written notice of cancelation.											
CERTIFICATE HOLDER					CANCELLATION						
Kilwins Quality Confections, Inc 1050 Bay View Rd					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						

Petoskey

MI 49770