



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

07/18/2023

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 Arnold and Barton Insurance Group 700 11th Street South Suite #202 Naples FL 34102	PHONE (A/C, No, Ext): (239) 331-8595	COMPANY Atain Specialty Insurance Company
FAX (A/C, No): (239) 331-8589	E-MAIL ADDRESS: rich@abnaples.com	
CODE: AGENCY CUSTOMER ID #:	SUB CODE:	
INSURED Sue's Sweet Shop of Naples LLC 743 5th Ave. S Naples FL 34102	LOAN NUMBER	POLICY NUMBER BWPF0070783R01
	EFFECTIVE DATE 01/15/2023	EXPIRATION DATE 01/15/2024
	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION LOC#:1 Bldg#:1, 743 5th Ave. S, Naples, FL 34102
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 BASIC BROAD SPECIAL

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Building: Betterments & Improvements--: Replacement Cost--No Coinsurance	\$185,000	5% wind \$2500 AOP
Business personal Property--Replacement Cost--No Coinsurance	\$205,000	5% wind \$2500 AOP
Food Spoilage due to breakdown/contamination/power out	\$25,000	\$500
Loss of Business Income/Extra Expense--Actual Loss Sustained	12 Months	72 hour
Special Coverage Form 30 day notice of cancelation		

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 			