



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

11/12/2020

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 Olivier-VanDyk Insurance Agency 2780 44th Street SW Wyoming, MI 49519	PHONE (A/C, No, Ext): 616-454-0800	COMPANY Citizens Insurance Company 808 North Highlander Way Howell, MI 48843
FAX (A/C, No): 616-454-7100	E-MAIL ADDRESS: certificates@ovdinsurance.com	
CODE:	SUB CODE:	
AGENCY CUSTOMER ID #:		
INSURED BCL Realty Group, LLC 1880 Willshire Glen Alpharetta, GA 30009	LOAN NUMBER	POLICY NUMBER O7IH426317
	EFFECTIVE DATE 11/10/2020	EXPIRATION DATE 11/10/2021
	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION

LOCATION/DESCRIPTION 450 Chambers St, Woodstock, GA 30188
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				AMOUNT OF INSURANCE	DEDUCTIBLE
	BASIC	BROAD	X	SPECIAL		
COVERAGE / PERILS / FORMS						
Business Personal Property including Tenants Improvements & Betterments					390,000	500
Business Income - 12 months ALS						
Spoilage					25,000	
Wind Included						

REMARKS (Including Special Conditions) 30 Day Notice of Cancellation
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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	<table border="1"> <tr> <td>NAME AND ADDRESS</td> <td>ADDITIONAL INSURED</td> <td>LENDER'S LOSS PAYABLE</td> <td>LOSS PAYEE</td> </tr> <tr> <td rowspan="2">Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey, MI 49770</td> <td>MORTGAGEE</td> <td></td> <td></td> </tr> <tr> <td>LOAN #</td> <td colspan="2"></td> </tr> <tr> <td></td> <td colspan="3">AUTHORIZED REPRESENTATIVE <i>Becky Hart</i></td> </tr> </table>	NAME AND ADDRESS	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE	Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey, MI 49770	MORTGAGEE			LOAN #				AUTHORIZED REPRESENTATIVE <i>Becky Hart</i>		
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