

## **EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 02/27/2019

THIS EVIDENCE OF COMMERCIAL 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. THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE		IIS I	EVID	ENCE OF INSURANCE I	DOES NOT CONST		E A CONTRACT BETWEEN	
PRODUCER NAME. PHONE (734) 741-0044				COMPANY NAME AND ADDRESS NAIC NO: 39926				
CONTACT PERSON AND ADDRESS ((A/C, No, Ext): (154) 141 5544 Hylant - Southeast Michigan 24 Frank Lloyd Wright Dr, Ste J4100 Ann Arbor, MI 48105				Selective Insurance Co of SE 40 Wantage Avenue Branchville, NJ 07890				
Contact name:								
FAX (AC, No): (734) 741-1850 E-MAIL ADDRESS: annarbor@hylant.com				IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH				
CODE: 21040 SUB CODE:				POLICY TYPE				
AGENCY CUSTOMER ID #: POLLCON-01				Business Owners Policy				
NAMED INSURED AND ADDRESS  Pollyanna's Confectionary Shop 152 Butler St Saugatuck, MI 49453				LOAN NUMBER POLICY NUMBER S 1933074				
				EFFECTIVE DATE EXPIRATION DATE				
				2/2/2019	2/2/2020		CONTINUED UNTIL TERMINATED IF CHECKED	
ADDITIONAL NAMED INSURED(S)				THIS REPLACES PRIOR EVIDENCE DATED:				
PROPERTY INFORMATION (ACORD 101 may be attached if more space			is required) X BUILDING OR X BUSINESS PERSONAL PROPERTY					
LOCATION / DESCRIPTION LOC # 1, Bldg # 1, 152 BUTLER ST, SAUGATUCK, MI 49453 SEE ATTACHED ACORD 101 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	BA	SIC		BROAD SPECIA	L			
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$						D	ED:	
	_	NO	N/A					
X BUSINESS INCOME RENTAL VALUE	X			If YES, LIMIT:	X	Actual	Loss Sustained; # of months:	
BLANKET COVERAGE	$\perp$		X	If YES, indicate value(s) rep	orted on property identi	ified a	above: \$	
TERRORISM COVERAGE	$\perp$			Attach Disclosure Notice / D	EC			
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	$\perp$							
IS DOMESTIC TERRORISM EXCLUDED?	$\perp$							
LIMITED FUNGUS COVERAGE	$\perp$			If YES, LIMIT:			DED:	
FUNGUS EXCLUSION (If "YES", specify organization's form used)	<u> </u>							
REPLACEMENT COST	X							
AGREED VALUE	₩							
COINSURANCE	<u> </u>			If YES, %				
EQUIPMENT BREAKDOWN (If Applicable)	X			If YES, LIMIT:			DED:	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	₩			If YES, LIMIT:			DED:	
- Demolition Costs	_			If YES, LIMIT:			DED:	
- Incr. Cost of Construction	_			If YES, LIMIT:			DED:	
EARTH MOVEMENT (If Applicable)	₩			If YES, LIMIT:			DED:	
FLOOD (If Applicable)	₩			If YES, LIMIT:			DED:	
WIND / HAIL INCL YES NO Subject to Different Provisions:	$\vdash$			If YES, LIMIT:			DED:	
NAMED STORM INCL YES NO Subject to Different Provisions:  PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS				If YES, LIMIT:			DED:	
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								
CONTRACT OF SALE LENDER'S LOSS PAYABLE LOSS PAYEE				LENDER SERVICING AGENT N	AME AND ADDRESS			
MORTGAGEE NORTGAGE								
NAME AND ADDRESS								
Kilwins Chocolates Franchise Inc. & Kilwin's Quality Confections Inc. 1050 Bay View Road Petoskey, MI 49770				AUTHORIZED REPRESENTATIVE MILL IM. JLX				

ACORD 28 (2016/03)

LOC#:



## ADDITIONAL REMARKS SCHEDULE

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AGENCY	NAMED INSURED POllyanna's Confectionary Shop 152 Butler St Saugatuck, MI 49453						
Hylant - Southeast Michigan							
POLICY NUMBER							
S 1933074							
CARRIER	NAIC CODE						
Selective Insurance Co of SE	39926	EFFECTIVE DATE: 02/02/2018					

## **ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

## Property Information:

Loc # 1 Bldg # 1 152 Butler St, SAUGATUCK, MI 49453

Loc # 2, Bldg # 1, 119-121 BUTLER ST, SAUGATUCK, MI 49453

Loc # 3, Bldg # 1, 3200 RIVERTOWN, GRANDVILLE, MI 49418

Loc # 4, Bldg # 1, 415 PHOENIX ST, SOUTH HAVEN, MI 49090

Special Conditions:

Location 1- 152 Butler St Saugatuck, MI 49453 Business Personal Property \$449,674

Location 2- 119-121 Buutler St Saugatuck, MI 49453 Business Personal Property \$209,100 Tenants Improvements & Betterments \$188,700

Location 3 Building \$ 76,977

Location 3 - 3200 Rivertown Suite 2192 Grandville, MI 49418 Business Personal Property \$397-800

Location 4- 415 Phoenix St South Haven MI 49090 Business Personal Property \$234,384

**Building \$325,000** 

Spoilage Included \$25,000 each location per endorsement BP 71 35 04 10 (attached)

Each Location -Business Income Actual Loss Sustained - 12 months

Blanekt Additional Coverage for : Blanket Limit \$75,000

for Account Receivables, Electronic Information SYstems, Temperature Change, Valuable papers and records