

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

		•••					_	1/:	29/2024	
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).										
Olivier VanDyk Insurance Agency, Inc					NAME: FAX PHONE FAX (A/C, No, Ext): 6164540800 (A/C, No, Ext): 61645407100					
2780 44TH STREET SW					E-MAIL ADDRESS: certificates.sbu@ovdinsurance.com					
Wyoming MI 49519										
					INSURER(S) AFFORDING COVERAGE INSURER A : Citizens Ins Co Of Amer				NAIC # 31534	
License#: 0007645 INSURED CHOCONM-01										
Chocolates on Main, LLC					INSURER B :					
4390 Old River Rd Waynesville NC 28786					INSURER C :					
Waynesville NC 20700					INSURER D :					
					INSURER E :					
COVERAGES CERTIFICATE NUMBER: 1942300648					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.										
INSR LTR TYPE OF INSURANCE		SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
A X COMMERCIAL GENERAL LIABILITY	Y	Y	Z2IJ072444		7/8/2023	7/8/2024	EACH OCCURRENCE	\$ 1,000	,000	
CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000	,000	
							MED EXP (Any one person)	\$ 10,000		
X Primary/NonContr							PERSONAL & ADV INJURY	\$ 1,000	,000	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$2,000	,000	
POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$2,000	,000	
OTHER:								\$		
	Y	Y	Z2IJ072444		7/8/2023	7/8/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	,000	
							BODILY INJURY (Per person)	\$		
OWNED SONLY SCHEDULED AUTOS ONLY HIRED VONNED							BODILY INJURY (Per accident)	\$		
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
								\$		
A X UMBRELLA LIAB X OCCUR	Y	Y	Z2IJ072444		7/8/2023	7/8/2024	EACH OCCURRENCE	\$ 1,000	,	
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 1,000	,000	
DED X RETENTION \$ 0 A WORKERS COMPENSATION		Y	W2IJ312645		0/40/0004	2/12/2025	X PER OTH-	\$		
AND EMPLOYERS' LIABILITY Y / N		T	VVZIJ312045		2/13/2024	2/13/2025	A STATUTE ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$1,000		
(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$ 1,000		
DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 1,000	,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)										
90 N Main St, Waynesville, NC 28786										
CERTIFICATE HOLDER CANCELLATION										
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI					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					

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