



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

08/08/2023

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. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS AMARISK INSURANCE, LLC 615 MAIN ST, SUITE 114 FRISCO TX 75034		PHONE (A/C, No, Ext): 832 567 8608	COMPANY NAME AND ADDRESS CHUBB INSURANCE GROUP 5001 SPRING VALLEY, SUITE 1000W DALLAS TX 75244	NAIC NO:
FAX (A/C, No):	E-MAIL ADDRESS: FROGGY@AMARISKINSURANCE.CC		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE: AGENCY CUSTOMER ID #:	SUB CODE:		POLICY TYPE PROPERTY	
NAMED INSURED AND ADDRESS OPEN BARREL INC. DBA KILWIN'S FRANCHISE 9945 BARKER CYPRESS SUITE 126 CYPRESS TX 77433		LOAN NUMBER	POLICY NUMBER PRIMARY AND NON-CONTRIBU	
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE 08/08/2023	EXPIRATION DATE 08/08/2024	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (Use REMARKS on page 2, if more space is required)
 BUILDING OR BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION 9945 BARKER CYPRESS CYPRESS TX 77433	SUITE 126
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	<input checked="" type="checkbox"/> SPECIAL
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 390,000					DED: \$500
	<input checked="" type="checkbox"/> BUSINESS INCOME	<input type="checkbox"/> RENTAL VALUE	YES	NO	N/A
	BLANKET COVERAGE				if YES, LIMIT: \$2,000,000
	TERRORISM COVERAGE				Actual Loss Sustained; # of months: 12
	IS THERE A TERRORISM-SPECIFIC EXCLUSION?				if YES, indicate value(s) reported on property identified above: \$
	IS DOMESTIC TERRORISM EXCLUDED?				Attach Disclosure Notice / DEC
	LIMITED FUNGUS COVERAGE				if YES, LIMIT: DED:
	FUNGUS EXCLUSION (If "YES", specify organization's form used)				
	REPLACEMENT COST				
	AGREED VALUE				
	COINSURANCE				if YES, %
	EQUIPMENT BREAKDOWN (If Applicable)				if YES, LIMIT: \$100,000 DED: \$500
	ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg				if YES, LIMIT: \$25,000 DED: \$500
	- Demolition Costs				if YES, LIMIT: \$25,000 DED: \$500
	- Incr. Cost of Construction				if YES, LIMIT: \$25,000 DED: \$500
	EARTH MOVEMENT (If Applicable)				if YES, LIMIT: DED:
	FLOOD (If Applicable)				if YES, LIMIT: DED:
	WIND / HAIL (If Subject to Different Provisions)				if YES, LIMIT: DED: 2%
	PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS				
	FOOD SPOILAGE				\$50,000

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

<input checked="" type="checkbox"/> MORTGAGEE <input checked="" type="checkbox"/> LENDERS LOSS PAYABLE	<input type="checkbox"/> CONTRACT OF SALE	LENDER SERVICING AGENT NAME AND ADDRESS
NAME AND ADDRESS KILWINS CHOCOLATE FRANCISE, INC. 1050 BAY VIEW ROAD PETOSKEY MI 49770		AUTHORIZED REPRESENTATIVE PHUC H DANG

EVIDENCE OF COMMERCIAL PROPERTY INSURANCE REMARKS - Including Special Conditions (Use only if more space is required)

THE INTEREST OF THE LENDER AND THE SBA SHALL NOT BE INVALIDATED BY ANY ACT OF NEGLIGENCE OF THE MORTGAGOR OR OWNER OF THE INSURED PROPERTY.

30 DAY NOTICE OF CANCELLATION APPLIES

PRIMARY AND NON-CONTRIBUTORY APPLIES TO GENERAL LIABILITY AND UMBRELLA FOR THE ADDITIONAL INSURED

WAIVER OF SUBROGATION APPLIES TO GENERAL LIABILITY AND UMBRELLA FOR THE ADDITIONAL INSURED