



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

12/10/2020

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.

<b>PRODUCER</b>  TEL/D / BYRD 97 E MAIN ST COATS NC 27521  <b>INSURER</b> MAGEE DULCE LLC DEAN MILWIN'S 1400 WENKS CARPENTER RD CARY NC 27519-8408	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <span style="float: right;">FAX (A/C, No):</span> E-MAIL ADDRESS: PRODUCER CUSTOMER ID:  <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> <tr> <td>INSURER A : NATIONWIDE MUTUAL FIRE INSURANCE COMP/</td> <td>23779</td> </tr> <tr> <td>INSURER B : NATIONWIDE GENERAL INSURANCE COMPANY</td> <td>23760</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : NATIONWIDE MUTUAL FIRE INSURANCE COMP/	23779	INSURER B : NATIONWIDE GENERAL INSURANCE COMPANY	23760	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

**LOCATION OF PREMISES / DESCRIPTION OF PROPERTY** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Loc # 004 Bldg# 001; 26 BATTERY PARK AVE ASHEVILLE, NC 28801-2715  
 ICE CREAM SHOP

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/> PROPERTY	ACP BPFF 2214218106	12/05/2020	12/05/2021	<input checked="" type="checkbox"/> BUILDING	\$ 190,600
	<input type="checkbox"/> USES OF LOSS				<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$ 211,000
	<input type="checkbox"/> DEDUCTIBLES				<input checked="" type="checkbox"/> BUSINESS INCOME	\$ 12 Months ALS
	<input type="checkbox"/> BASIC BUILDING				<input checked="" type="checkbox"/> EXTRA EXPENSE	\$ 12 Months ALS
	<input type="checkbox"/> BROAD \$1,000 CONTENTS				RENTAL VALUE	\$
	<input checked="" type="checkbox"/> SPECIAL \$1,000				BLANKET BUILDING	\$
	<input type="checkbox"/> EARTHQUAKE				BLANKET PERS PROP	\$
	<input type="checkbox"/> WIND				BLANKET BLDG & PP	\$
	<input type="checkbox"/> FLOOD					\$
	<input checked="" type="checkbox"/> EQUIP BRKDN					\$
<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY					\$
<input type="checkbox"/> USES OF LOSS	POLICY NUMBER					\$
<input type="checkbox"/> NAMED PERILS						\$
<input type="checkbox"/> CRIME						\$
<input type="checkbox"/> TYPE OF POLICY						\$
<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN						\$
						\$
						\$

**SPECIAL CONDITIONS / OTHER COVERAGES** (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  KILWINS CHOCOLATE FRANCHISE, INC & KILWINS QUALITY CONFECTIONS, INC 1050 BAY VIEW ROAD PETOSKY MI 49770	<b>CANCELLATION</b>  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 Teddy Byrd
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