

CERTIFICATE OF LIABILITY INSURANCE

05/11/2017

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).

2		CONTACT Kevin Sevier			
Kevin Sevier		PHONE (A/C, No. Ext): 843-837-2886 FAX (A/C, No): 843-837-2881 E-MAIL ADDRESS: kevin@kevinsevier.com			
State Farm Insurance					
27 Towne Dr, Ste 302				NAIC #	
Bluffton	SC 29910	INSURER A: State Farm Fire and Casua	alty Company	25143	
INSURED		INSURER B: State Farm Mutual Automobile Insurance Company			
MKC, Inc		INSURER C : INSURER D :			
BA Kilwins Chocolate Fudge and Ice	e Cream				
O Box 24172		INSURER E : INSURER F :			
ilton Head Island	SC 29925				
CERTIFICAT	TE NUMBER:	REVI	SION NUMBER:		
	State Farm Insurance 27 Towne Dr, Ste 302 Bluffton MKC, Inc BA Kilwins Chocolate Fudge and Ice D Box 24172 Iton Head Island	State Farm Insurance 27 Towne Dr, Ste 302 Bluffton SC 29910 MKC, Inc BA Kilwins Chocolate Fudge and Ice Cream D Box 24172	NAME: NAME	NAME NAME NAME	

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.

TR			SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR	Y	10.530757	99-BJ-H223-4	10/26/2016	10/26/2017	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Fa occurrence)	\$ 1,000,000 \$ 300,000
							MED EXP (Any one person)	\$ 10,000
			Y				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:							\$
	AUTOMOBILE LIABILITY	Υ	Y 40-1994-M10	05/10/2017	05/10/2018	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	ANY AUTO						BODILY INJURY (Per person)	\$
В	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
							WORKS WORK	\$
300-3	UMBRELLA LIAB OCCUR	Y		99-BJ-J190-6	10/26/2016	10/26/2017	EACH OCCURRENCE	\$ 1,000,000
A	EXCESS LIAB CLAIMS-MADE		Υ				AGGREGATE	\$
	DED RETENTION\$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A Y		99-BR-M579-2	10/26/2016	10/26/2017	PER STATUTE OTH- ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE Y N / A (Mandatory in NH)		v				E.L. EACH ACCIDENT	s 1,000,000
٨							E.L. DISEASE - EA EMPLOYEE	the state of the s
	If yes, describe under DESCRIPTION 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)

Location: 1414 Fording Island Rd, Ste 200, Bluffton, SC 29910

Kilwins Chocolate Franchise, Inc. and Kilwins Quality Confections Inc. are listed as Additional Insured on Primary and Non-Contributory basis with regards to General Liability, Auto Liability, Umbrella in favor of Kilwins Chocolate Franchise, Inc. and Kilwins Quality Confections, Inc. Umbrella coverage is follow form. 30 days notice of cancellation or non-renewal must be provided to the Franchisor on all coverages. Coverages listed are minimum requirements. Carriers must be A- Rated or better by AM Best.

CERTIFICATE HOLDER			CANCELLATION			
	Kilwin's Chocolate Franchise, Inc. and		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
	Kilwin's Quality Confections, Inc.		AUTHORIZED REPRESENTATIVE			
	1050 Bay View Rd		AUTHORIZED REPRESENTIVE			
	Petoskey	MI 49770	/May 51.16			
			C 4000 2045 A COPP COPPORATION All debts assessed			

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