



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

3/3/2026

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

AGENCY BHS Insurance 3055 44th St SW Grandville, MI 49418		PHONE (A/C, No, Ext): 616-531-1900	COMPANY Selective Insurance Company 900 E 96th St Suite 400 Indianapolis, IN 46240	
FAX (A/C, No): 616-574-3317	E-MAIL ADDRESS:			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #:			LOAN NUMBER	POLICY NUMBER S 2498611
INSURED KTY LLC & BKTY LLC 4845 Corporate Exchange Blvd SE Grand Rapids MI 49512			EFFECTIVE DATE 03/01/2026	EXPIRATION DATE 03/01/2027
			<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION

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	X	SPECIAL	AMOUNT OF INSURANCE	DEDUCTIBLE
					\$270,092	\$1,000
					\$250,705	\$1,000
					\$25,000	0 Hours
					\$264,795	\$1,000
					\$245,789	\$1,000
					\$25,000	0 Hours

REMARKS (Including Special Conditions)

Spoilage Coverage- The most we will pay for loss, damage or expense under this coverage is \$25,000
 Kilwins Chocolates Franchise, Inc. is listed as additional insured on a primary and non-contributory basis relative to general, auto, and umbrella liability per the insured's policy form. Waiver of subrogation applies to general, auto, umbrella liability and worker's compensation in favor of the additional insured. 30 days' notice provided in the event of cancellation except for 10 days' notice provided for non-payment per insured's policy form.

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

NAME AND ADDRESS Kilwins Chocolates Franchise, Inc. 1050 Bay View Road Petoskey, MI 49770	<input type="checkbox"/> ADDITIONAL INSURED	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE
	<input type="checkbox"/> MORTGAGEE		
	LOAN #		
AUTHORIZED REPRESENTATIVE 			