

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/12/2024

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). PRODUCER CONTACT Karen Durham											
PRODUCER					NAME: Nateri Dumani						
Greystone Insurance					(A/C, No, Ext): (828) 204-8804 (A/C, No):						
a div of LifeStore Insurance					E-MAIL ADDRESS: kdurham@golifestore.com						
1675 Blowing Rock Rd					INSURER(S) AFFORDING COVERAGE NAIC #						
Boone NC 28607					INSURER A: Hartford Ins Co SE 3820						
INSURED					INSURER B :						
Bilcat Inc					INSURER C :						
Po Box 682	INSURER D :										
	INSURER E :										
Blowing Rock	SURER F :										
COVERAGES CERTIFICATE NUMBER: CL2431226447 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. INSRI IDDUCY EFF I POLICY											
INSR LTR TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)		LIMIT	s		
COMMERCIAL GENERAL LIABILITY							EACH OCCURRENC	CE	\$		
CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence) \$				
							MED EXP (Any one person) \$				
							PERSONAL & ADV INJURY \$				
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	ATE	\$		
POLICY PRO- JECT LOC							PRODUCTS - COMF	P/OP AGG	\$		
OTHER:						\$					
							COMBINED SINGLE LIMIT (Ea accident)				
ANY AUTO	IY AUTO					BODILY INJURY (Pe	r person)	\$			
OWNED SCHEDULED					BODILY INJURY (Per a		r accident)	dent) \$			
AUTOS ONLY AUTOS HIRED NON-OWNED							PROPERTY DAMAGE				
AUTOS ONLY AUTOS ONLY							(Per accident)		\$		
							EACH OCCURRENC	E	\$		
EXCESS LIAB CLAIMS-MADE	_						AGGREGATE		\$		
DED RETENTION \$	_							OTH-	\$		
AND EMPLOYERS' LIABILITY Y/N							PER STATUTE	ER			
A ANY PROPRIETOR/PARTNER/EXECUTIVE N	N/A		22WECAJ80JZ		01/01/2024	01/01/2025	E.L. EACH ACCIDEN	T	\$ 1,00		
(Mandatory in NH)	'								\$ 1,00		
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$		\$ 1,00	0,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL	-			-	-		Confections las		22		
Waiver of Transfer of Transfer of Rights and 30 13 and WC 32 03 01 D	Day N	OTICE	in ravor of Kilwins Chocolates	Franch	se inc. and Ki	win's Quality C	contections Inc. pe	er vvC 00 (13		
CERTIFICATE HOLDER CANCELLATION											
Kilwins Chocolates Franchise Inc. and Kilwin's Quality Confections Inc.					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
1050 Bay View Road	JTHORIZED REPRESENTATIVE										
Petoskey	MI 49770-9006	Karin B. Durkan									

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