

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/30/2017

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).

PRODUCER		CONTACT Angie Fagan				
Olivier-VanDyk Insurance Agency 2780 44th Street SW		PHONE (A/C, No, Ext): 616-454-0800 FAX (A/C, No): 616		54-7100		
Wyoming MI 49519		E-MAIL ADDRESS: angief@ovdinsurance.com				
, , , , , , , , , , , , , , , , , , , ,		INSURER(S) AFFORDING COVERAGE	NAIC #			
		INSURER A: Citizens Insurance Company	31534			
INSURED	GRUL&CL-01	INSURER B:				
Gruling & Clark LLC		INSURER C:				
4756 N Newhall St Whitefish Bay WI 53217		INSURER D :				
Willensii Bay Wi 33217		INSURER E :				
		INSURER F:				
	10101100	4				

COVERAGES CERTIFICATE NUMBER: 1010440064 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.

	INSR   ADDLISUBR   POLICY EFF   POLICY EXP							
INSR LTR		TYPE OF INSURANCE	INSD WV	D POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	Х	COMMERCIAL GENERAL LIABILITY	YY	O7I D334468	8/4/2017	8/4/2018	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
							MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$1,000,000
	GEI	N'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$2,000,000
		POLICY PRO- LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:						\$
Α	AU1	TOMOBILE LIABILITY		O7I D334468	8/4/2017	8/4/2018	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
		ANY AUTO					BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY AUTOS					BODILY INJURY (Per accident)	\$
		HIRED AUTOS ONLY NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
								\$
Α	Х	UMBRELLA LIAB X OCCUR		O7I D334468	8/4/2017	8/4/2018	EACH OCCURRENCE	\$3,000,000
		EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$3,000,000
		DED RETENTION \$						\$
Α	A WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y	W2I D334436	8/4/2017	8/4/2018	PER OTH- STATUTE ER	
			N/A				E.L. EACH ACCIDENT	\$1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$1,000,000
							E.L. DISEASE - POLICY LIMIT	\$1,000,000
				1			l .	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections, Inc. are listed as Additional Insured on Primary and Non-Contributory basis with regards to General Liability, Automobile Liability and Umbrella.

Waiver of Subrogation with regards to Workers' Compensation/Employers Liability, General Liability, Automobile Liability, Umbrella in favor of Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections, Inc. Umbrella coverage is follow form.

30 day notice of cancellation or non-renewal will be provided.

CERTIFICATE HOLDER	CANCELLATION
Kilwins Chocolates Franchise, Inc. Kilwin's Quality Confections, Inc. 1050 Bay View Road Petoskey MI 49770	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Feloskey IVII 49770	AUTHORIZED REPRESENTATIVE