PGREENTHAL

GRUL&CL-01

DATE (MM/DD/YYYY)	
8/6/2021	

CERTIFICATE OF LIABILITY INSURANCE

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 If SUBROGATION IS WAIVED, subject to this certificate does not confer rights to the	the terms and conditions of t	the policy, certain ch endorsement(s)	policies may).	NAL INSURED provision require an endorseme	ons or b nt. A s	e endorsed. tatement on
PRODUCER		CONTACT Patricia	Greenthal			
Robertson Ryan - Milwaukee 330 East Kilbourn Avenue, Suite 650 Milwaukee, WI 53202	PHONE (A/C, No, Ext): (414) 283-4229 229 FAX (A/C, No): (414) 271-1523 E-MAIL ADDRESS: pgreenthal@robertsonryan.com				271-1523	
			NSURER(S) AFFORDING COVERAGE			NAIC #
		INSURER A : ACUIT				14184
INSURED		INSURER B :				
Gruling & Clark LLC DBA Kilwins		INSURER C :				
4756 N Newhall St	-	INSURER D :				
Whitefish Bay, WI 53211-1155		INSURER E :				
		INSURER F :				
COVERAGES CERTIFIC	CATE NUMBER:			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 TYPE OF INSURANCE ADDL	SUBR POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIN	ITS	
A COMMERCIAL GENERAL LIABILITY				EACH OCCURRENCE	\$	1,000,000
CLAIMS-MADE OCCUR	ZG4481	8/4/2021	8/4/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000
				MED EXP (Any one person)	\$	10,000
				PERSONAL & ADV INJURY	\$	Included
GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$	3,000,000
POLICY PRO- JECT LOC				PRODUCTS - COMP/OP AGO	\$	3,000,000
OTHER:					\$	
				COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
ANY AUTO	ZG4481	8/4/2021	8/4/2022	BODILY INJURY (Per person)	\$	
OWNED SCHEDULED AUTOS ONLY				BODILY INJURY (Per accider	t) \$	
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY				PROPERTY DAMAGE (Per accident)	\$	
					\$	
A UMBRELLA LIAB X OCCUR		01110001	01110000	EACH OCCURRENCE	\$	3,000,000
EXCESS LIAB CLAIMS-MADE	ZG4481	8/4/2021	8/4/2022	AGGREGATE	\$	3,000,000
DED RETENTION \$					\$	
A WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	704404	0/4/0004	0/4/0000	X PER OTH- STATUTE ER		4 000 000
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	ZG4481	8/4/2021	8/4/2022	E.L. EACH ACCIDENT	\$	1,000,000
(Mandatory in NH)				E.L. DISEASE - EA EMPLOY	EE \$	1,000,000 1,000,000
If yes, describe under DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMI	т \$	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 080420

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

Waiver of Subrogation with regards to Worker's Compensation/Employers Liability, General Liability, and Automobile Liability in favor of Kilwins Chocolates Franchise, Inc and Kilwin's Quality Confections Inc. SEE ATTACHED ACORD 101

CERTIFICATE HOLDER	CANCELLATION
Kilwins Chocolates Francies Inc 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 Rd Petoskey, MI 49770	AUTHORIZED REPRESENTATIVE

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AGENCY	CUSTOMER	ID:	GRUL&CL-0
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LOC #: 1



ADDITIONAL REMARKS SCHEDULE

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AGENCY		NAMED INSURED	
Robertson Ryan - Milwaukee		Gruling & Clark LLC DBA Kilwins 4756 N Newhall St	
POLICY NUMBER		Whitefish Bay, WI 53211-1155	
SEE PAGE 1			
CARRIER	NAIC CODE		
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1	
ADDITIONAL REMARKS			

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles: Umbrella coverage is following form.

30 days notice of cancellation or non-renewal included in favor of additional insureds. Except regarding nonpayment of premium, which is 10 days notice.