LOC #:



## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

	NAMED INSURED	
	800 W Broadway Mount Pleasant, MI 48858	
NAIC CODE		
14060	EFFECTIVE DATE: 08/16/2025	
		Elliott's Greenhouse, Inc. 800 W Broadway Mount Pleasant, MI 48858

ADDITIONAL REMARKS  THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE	ADDITIONAL REMARKS  THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE	CARRIER	NAIC CODE	<u> </u>		
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FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE	FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE					
		Property Information: Loc # 1, Bldg # 2, \$38,000 ACV bld \$40,000 content RC BI-ALS Ded \$1000				



## EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

10/16/2025 THIS EVIDENCE OF COMMERCIAL 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 OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. PRODUCER NAME, CONTACT PERSON AND ADDRESS Doehring Schultz Agency 3975 W Monroe Rd Alma, MI 48801 NAIC NO: 14060 COMPANY NAME AND ADDRESS Grange Contact name: Doehring Schultz - MP FAX (A/C, No): (989) 463-8663 insurance@doehringschultz.com IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH POLICY TYPE CODE: SUB CODE: AGENCY CUSTOMER ID #: ELLIGRE-01 Business Owners Policy POLICY NUMBER NAMED INSURED AND ADDRESS LOAN NUMBER BP 2790698 Elliott's Greenhouse, Inc. 800 W Broadway Mount Pleasant, MI 48858 EFFECTIVE DATE EXPIRATION DATE CONTINUED UNTIL TERMINATED IF CHECKED 8/16/2025 8/16/2026 ADDITIONAL NAMED INSURED(S) THIS REPLACES PRIOR EVIDENCE DATED: PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) ■ BUILDING OR ■ BUSINESS PERSONAL PROPERTY LOCATION / DESCRIPTION
Loc # 1, Bldg # 1, \$971,000 ACV \$107,000 contents RC BI-ACV Ded \$1000 **SEE ATTACHED ACORD 101** 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. PERILS INSURED X | SPECIAL **COVERAGE INFORMATION** BROAD COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: DED: YES NO N/A X BUSINESS INCOME RENTAL VALUE X If YES, LIMIT Actual Loss Sustained; # of months: If YES, indicate value(s) reported on property identified above: \$ **BLANKET COVERAGE** TERRORISM COVERAGE Attach Disclosure Notice / DEC IS THERE A TERRORISM-SPECIFIC EXCLUSION? IS DOMESTIC TERRORISM EXCLUDED? LIMITED FUNGUS COVERAGE If YES, LIMIT: DFD: FUNGUS EXCLUSION (If "YES", specify organization's form used) REPLACEMENT COST AGREED VALUE COINSURANCE If YES. **EQUIPMENT BREAKDOWN (If Applicable)** If YES, LIMIT: DED: ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg If YES, LIMIT: DED: - Demolition Costs If YES, LIMIT: DFD: - Incr. Cost of Construction If YES, LIMIT EARTH MOVEMENT (If Applicable) If YES, LIMIT: DED: FLOOD (If Applicable) If YES, LIMIT: DED: WIND / HAIL INCL DED ☐ YES ☐ NO Subject to Different Provisions: If YES, LIMIT: NAMED STORM INCL YES NO Subject to Different Provisions If YES, LIMIT: PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS 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** LENDER SERVICING AGENT NAME AND ADDRESS CONTRACT OF SALE LENDER'S LOSS PAYABLE LOSS PAYEE MORTGAGEE NAME AND ADDRESS Kilwin's Chocolate Franchise, Inc 1050 Bay View Road

Petoskey, MI 49770

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AUTHORIZED REPRESENTATIVE