



## EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY) 06/27/2017

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 (A/C, No, Ext): 850-769-5215 **COMPANY NAME AND ADDRESS** NAIC NO: 19690 Brown & Brown Panama City **American Economy** 647 Luverne Avenue Panama City, FL 32401 Travis Thompson FAX (A/C, No): 850-763-6669 IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH POLICY TYPE CODE: SUB CODE: AGENCY CUSTOMER ID #: Package (C) EMERA16 LOAN NUMBER POLICY NUMBER NAMED INSURED AND ADDRESS Emerald Coast Confections, Inc 02-BP-877294-8 DBA: Kilwin's Choc & Ice Cream 821 Pier Park Dr Suite 100 EFFECTIVE DATE **EXPIRATION DATE** Panama City Beach, FL 32413 CONTINUED UNTIL TERMINATED IF CHECKED 02/05/17 02/05/18 THIS REPLACES PRIOR EVIDENCE DATED: ADDITIONAL NAMED INSURED(S) ☐ BUILDING OR ☒ BUSINESS PERSONAL PROPERTY PROPERTY INFORMATION (Use REMARKS on page 2, if more space is required) LOCATION / DESCRIPTION 821 Pier Park Dr Suite 100 Panama City Beach, FL 32413 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. **BROAD** X SPECIAL COVERAGE INFORMATION PERILS INSURED BASIC COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 428,000 DED: 250 YES NO N/A X BUSINESS INCOME ☐ RENTAL VALUE Actual Loss Sustained; # of months: X If YES, LIMIT: X 12 BLANKET COVERAGE X If YES, indicate value(s) reported on property identified above: \$ TERRORISM COVERAGE X Attach Disclosure Notice / DEC IS THERE A TERRORISM-SPECIFIC EXCLUSION? X IS DOMESTIC TERRORISM EXCLUDED? X LIMITED FUNGUS COVERAGE If YES, LIMIT: DFD: X FUNGUS EXCLUSION (If "YES", specify organization's form used) X REPLACEMENT COST X AGREED VALUE X COINSURANCE If YES, X % **EQUIPMENT BREAKDOWN (If Applicable)** X If YES, LIMIT: DFD: 250 428,000 ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg If YES, LIMIT: X DED: If YES, LIMIT: DFD: - Demolition Costs X - Incr. Cost of Construction X If YES, LIMIT: DED EARTH MOVEMENT (If Applicable) X If YES LIMIT DFD: FLOOD (If Applicable) If YES LIMIT DFD: X WIND / HAIL INCL ☐ YES 
▼ NO Subject to Different Provisions: X If YES, LIMIT: DED: NAMED STORM INCL ☐ YES 🕱 NO Subject to Different Provisions: X If YES, LIMIT: DED PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE X 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 I ENDER SERVICING AGENT NAME AND ADDRESS MORTGAGEE CONTRACT OF SALE LENDERS LOSS PAYABLE NAME AND ADDRESS \*see notes\* AUTHORIZED REPRESENTATIVE

EVIDENCE OF COMMERCIAL PROPERTY INSURANCE REMARKS - Including Special Conditions (Use only if more space is required)
Spoilage: \$25,000
Tenants Improvements & Betterments: Included in BPP Limit
Flood Coverage: Policy# 09115011854107 - Eff Date: 10/17/16 - Building: \$400,000 - Contents: \$500,000 - Ded: \$1,250
Wind & Hail Coverage: Policy# CFA140075203 - Eff Date: 2/05/17 - Contents: \$325,000 - Ded: \$9,750

EMERA16 PAGE 3 NOTES: OP ID: TT INSURED'S NAME Emerald Coast Confections, Inc DATE 6/27/2017 Kilwin's Chocolates Franchise Inc & Kilwin's Quality Confections Inc 1050 Bay View Rd Petoskey, MI 49770