



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 Brown & Brown Panama City 647 Luverne Avenue Panama City, FL 32401 Travis Thompson		PHONE (A/C, No, Ext): 850-769-5215	COMPANY NAME AND ADDRESS American Economy	NAIC NO: 19690
FAX (A/C, No): 850-763-6669		E-MAIL ADDRESS:		
CODE:		SUB CODE:		
AGENCY CUSTOMER ID #: EMERA16		POLICY TYPE Package (C)		
NAMED INSURED AND ADDRESS Emerald Coast Confections, Inc DBA: Kilwin's Choc & Ice Cream 821 Pier Park Dr Suite 100 Panama City Beach, FL 32413		LOAN NUMBER	POLICY NUMBER 02-BP-877294-8	
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE 02/05/17	EXPIRATION DATE 02/05/18	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (Use REMARKS on page 2, if more space is required) BUILDING OR BUSINESS PERSONAL PROPERTY

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.

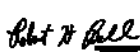
COVERAGE INFORMATION PERILS INSURED BASIC BROAD SPECIAL

COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 428,000		DED: 250	
	YES	NO	N/A
<input checked="" type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE	<input checked="" type="checkbox"/>		
			If YES, LIMIT: <input checked="" type="checkbox"/> Actual Loss Sustained; # of months: 12
BLANKET COVERAGE		<input checked="" type="checkbox"/>	If YES, indicate value(s) reported on property identified above: \$
TERRORISM COVERAGE	<input checked="" type="checkbox"/>		Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?			<input checked="" type="checkbox"/>
IS DOMESTIC TERRORISM EXCLUDED?			<input checked="" type="checkbox"/>
LIMITED FUNGUS COVERAGE		<input checked="" type="checkbox"/>	If YES, LIMIT: DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)	<input checked="" type="checkbox"/>		
REPLACEMENT COST	<input checked="" type="checkbox"/>		
AGREED VALUE		<input checked="" type="checkbox"/>	
COINSURANCE		<input checked="" type="checkbox"/>	If YES, %
EQUIPMENT BREAKDOWN (If Applicable)	<input checked="" type="checkbox"/>		If YES, LIMIT: 428,000 DED: 250
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		<input checked="" type="checkbox"/>	If YES, LIMIT: DED:
- Demolition Costs		<input checked="" type="checkbox"/>	If YES, LIMIT: DED:
- Incr. Cost of Construction		<input checked="" type="checkbox"/>	If YES, LIMIT: DED:
EARTH MOVEMENT (If Applicable)		<input checked="" type="checkbox"/>	If YES, LIMIT: DED:
FLOOD (If Applicable)		<input checked="" type="checkbox"/>	If YES, LIMIT: DED:
WIND / HAIL INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:	<input checked="" type="checkbox"/>		If YES, LIMIT: DED:
NAMED STORM INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:	<input checked="" type="checkbox"/>		If YES, LIMIT: DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS	<input checked="" type="checkbox"/>		

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

MORTGAGEE LENDERS LOSS PAYABLE	CONTRACT OF SALE	LENDER SERVICING AGENT NAME AND ADDRESS
NAME AND ADDRESS <p style="text-align: center;">*see notes*</p>		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**

NOTES:

INSURED'S NAME **Emerald Coast Confections, Inc**

EMERA16

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OP ID: TT

DATE **6/27/2017**

Kilwin's Chocolates Franchise Inc
& Kilwin's Quality Confections Inc
1050 Bay View Rd
Petoskey, MI 49770