

Additional Named Insureds

Other Named Insureds

Kilwins

Doing Business As

ADDITIONAL COVERAGES

Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
Ref #	Description	Coverage Code	Form No.	Edition Date	
1	00001,312 JOHN RINGLING BLVD,Spoilage,	SPC			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
10,000					
Ref #	Description	Coverage Code	Form No.	Edition Date	
1	00001,312 JOHN RINGLING BLVD,Utility Services Dir,	UTLDP			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
10,000					
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,Business Personal Pro,	WNDST			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
260,000					
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,Business Personal Pro,	HURR			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
260,000					
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,Business Personal Pro,260,000	BPP			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
			2,500	Dollars	
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,Business Personal Pro,260,000	SPC			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
260,000			2,500	Dollars	
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,Business Personal Pro,260,000	SINK			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
					\$87.00
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,BI w/ Extra Expense,ALS	SPC			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
			72	Hours	
Ref #	Description	Coverage Code	Form No.	Edition Date	
2	00001,1471 NORTHGATE BOULEVARD,Wind/Hail Deductible,	WNDST			
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium
			5	Percent	
Ref #	Description	Coverage Code	Form No.	Edition Date	
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type	Premium