



# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

7/16/2021

THIS EVIDENCE OF 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.

AGENCY Hughes Insurance Agency, Inc. 328 Bay Road PO BOX 4630 Queensbury NY 12804	PHONE (A/C, No, Ext): (518)793-3131	COMPANY Tri-State Ins Co of Minnesota One Acadia Commons P.O. Box 9010 Westbrook ME 04098
FAX (A/C, No): (518)793-3121	E-MAIL ADDRESS:	
CODE: 8801	SUB CODE:	
AGENCY CUSTOMER ID #: 00016266		
INSURED THE SARATOGA SWEET TOOTH, LLC 420 BROADWAY SARATOGA SPRINGS NY 12866-2250	LOAN NUMBER	POLICY NUMBER ADV5362712-13
	EFFECTIVE DATE 8/1/2021	EXPIRATION DATE 8/1/2022
	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:		

## PROPERTY INFORMATION

LOCATION/DESCRIPTION Loc# 00001/Bldg# 00001 420 BROADWAY BLDG II SARATOGA SPRINGS, NY 12866
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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

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Business Personal Property, Replacement Cost, Special form	451,858	1,000
Improv & Betterments, Replacement Cost, Special form	25,000	1,000
Business Income - Actual Loss Sustained - 12 months		
Spoilage	10,000	1,000

## REMARKS (Including Special Conditions)

30 Day Notice of Cancellation Applies

## 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

NAME AND ADDRESS  KILWINS CHOCOLATES FRANCHISE INC& KILWINS QUALITY CONFECTIONS INC 1050 BAY VIEW ROAD PETOSKEY, MI 49770	MORTGAGEE	<input checked="" type="checkbox"/>	ADDITIONAL INSURED
	LOSS PAYEE	<input type="checkbox"/>	
LOAN #			
AUTHORIZED REPRESENTATIVE Linda Abodeely/CHELSE 			