

BHART



DATE (MM/DD/YYYY) 11/29/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

	his certificate does not confer rights to				uch end	orsement(s)		require an end	dorsemen	t. A s	tatement on	
PRODUCER Olivier-VanDyk Insurance Agency, Inc. 2780 44th St SW Wyoming, MI 49519						CONTACT NAME: PHONE (CAC) ASA COOC FAX (CAC) ASA 7400						
						(A/C, No, Ext): (616) 454-7100						
						E-MAIL ADDRESS:						
			INSURER(S) AFFORDING COVERAGE INSURER A : Citizens Insurance Company					NAIC#				
INCURED							sinsurance	Company			31534	
Chocolate Girl Expolosion Inc. 310 S Michigan Ave, Ste B						INSURER B:						
						INSURER C:						
	Chicago, IL 60604					INSURER E:						
					INSURER F:							
CO	VERAGES CER	TIFIC	CATE	E NUMBER:	INSUKLI	X F .		REVISION NU	MRFR:			
T IN C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R SERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	ES O EQUI PER	F INS IREMI TAIN,	SURANCE LISTED BELOW ENT, TERM OR CONDITIO , THE INSURANCE AFFOR	N OF A	NY CONTRAC THE POLICI	TO THE INSUICT OR OTHER	RED NAMED ABO R DOCUMENT WI BED HEREIN IS S	OVE FOR T	CT TO	O WHICH THIS	
INSR LTR			SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP					
A	X COMMERCIAL GENERAL LIABILITY			O7ID437293		11/27/2017	11/27/2018	EACH OCCURREN	ICE	\$	1,000,000	
	CLAIMS-MADE X OCCUR	X	X					DAMAGE TO RENTED PREMISES (Ea occurrence) \$		\$	300,000	
								MED EXP (Any one person)		\$	10,000	
								PERSONAL & ADV INJURY		\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE		\$	2,000,000	
	POLICY PRO- OTHER:							PRODUCTS - COMP/OP AGG		\$	2,000,000	
Α	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)		\$	1,000,000	
	X ANY AUTO		х	AWID437439		11/27/2017	11/27/2018	BODILY INJURY (Per person) \$		\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (F	Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMA (Per accident)	GE	\$		
										\$		
Α	X UMBRELLA LIAB X OCCUR					44/07/0047		EACH OCCURREN	NCE	\$	1,000,000	
	EXCESS LIAB CLAIMS-MADE	X	X	O7ID437293		11/27/2017	11/27/2018	AGGREGATE		\$	1,000,000	
Α	DED RETENTION \$						11/27/2018	N DED	OTH-	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		V	W2ID437283		11/27/2017		X PER STATUTE	ER		1,000,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		X	WZID437203		11/21/2017	11/2//2010	E.L. EACH ACCIDE		\$	1,000,000	
								E.L. DISEASE - EA EMPLOYEE			1,000,000	
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT		\$		
liabi	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI vins Chocolates Franchise Inc. and Kilw ility, auto liability and umbrella. Waiver cellation applies.	LES (/ ins Q of su	ACORI Quality Ibrog	0 101, Additional Remarks Schedu y Confections Inc. are add ation applies to general lia	ule, may be itional ir ability, a	e attached if mor nsured on a p uto liability, i	e space is requii orimary & noi umbrella and	red) n-contributory k I workers' comp	pasis with ensation.	regar A 30	ds to general day notice of	
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey, MI 49770						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. AUTHORIZED REPRESENTATIVE						