

CERTIFICATE OF LIABILITY INSURANCE

BHART DATE (MM/DD/YYYY)

SOMESWE-01

										01/	/17/2018	
C B	ERT ELC	CERTIFICATE IS ISSUED AS A TIFICATE DOES NOT AFFIRMA OW. THIS CERTIFICATE OF IN RESENTATIVE OR PRODUCER, A	FIVEL	Y O Anci	R NEGATIVELY AMEND, E DOES NOT CONSTITU	, EXTEND	OR ALT	ER THE CO	VERAGE AFFORDED	вү тн	E POLICIES	
lf	SU	ORTANT: If the certificate hold JBROGATION IS WAIVED, subje certificate does not confer rights	ect to	the	terms and conditions of	the policy	ý, certain j	policies may				
PRODUCER Olivier-VanDyk Insurance Agency, Inc. 2780 44th St SW Wyoming, MI 49519							CONTACT NAME: PHONE (A/C, No, Ext): (616) 454-0800 E-MAIL ADDRESS: (A/C, No): (616)				¥54-7100	
						INSURER(S) AFFORDING COVERAGE					NAIC #	
	PED)				INSURER A : Citizens Insurance Company					31534	
INSURED Something Sweet Inc.						INSURER B :						
		26 Battery Park Ave					INSURER D :					
Asheville, NC 28801							INSURER E :					
						INSURER F :						
TI IN C	HIS DIC ERT	RAGES CEI IS TO CERTIFY THAT THE POLIC CATED. CATED. NOTWITHSTANDING ANY "IFICATE MAY BE ISSUED OR MAY USIONS AND CONDITIONS OF SUCH	ies o Requ (Per Poli	F IN IREM TAIN CIES	ENT, TERM OR CONDITIO , THE INSURANCE AFFOR . LIMITS SHOWN MAY HAVE	N OF ANY DED BY T	CONTRACT	TO THE INSUF CT OR OTHER ES DESCRIB	ED OCUMENT WITH RESPE	СТ ТО	WHICH THIS	
INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUB	POLICY NUMBER		OLICY EFF M/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
Α	X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	x	x	OZID477585	01	1/12/2018	01/12/2019	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person)	\$ \$ \$	1,000,000 300,000 10,000 1,000,000	
	GE	I N'L AGGREGATE LIMIT APPLIES PER: POLICY PRO LOC JECT LOC	-						PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ \$ \$ \$	2,000,000 2,000,000	
Α	АU ⁻	ANY AUTO OWNED AUTOS ONLY	x	x	OZID477585	01	1/12/2018	01/12/2019	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$ \$ \$ \$	1,000,000	
										\$		
Α	X	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MAD	x	x	OZID477585	01	1/12/2018	01/12/2019	EACH OCCURRENCE AGGREGATE	\$ \$ \$	1,000,000 1,000,000	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			x	W2ID477571	01	01/12/2018	01/12/2019	Y PER STATUTE OTH- ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	If ye	es, describe under SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
		TION OF OPERATIONS / LOCATIONS / VEHI Chocolates Franchise Inc. and Kilv auto liability and umbrella. Waive										
CERTIFICATE HOLDER							CANCELLATION					
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd							SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Petoskey, MI 49770						AUTHORIZED REPRESENTATIVE						

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Beckyflart