



# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

1/4/2019

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 Olivier-VanDyk Insurance Agency 2780 44th Street SW Wyoming, MI 49519	PHONE (A/C, No, Ext): 616-454-0800	COMPANY Citizens Insurance Company 808 North Highlander Way Howell, MI 48843
FAX (A/C, No): 616-454-7100	E-MAIL ADDRESS: beckyh@ovdinsurance.com	
CODE:	SUB CODE:	
AGENCY CUSTOMER ID #:		
INSURED Something Sweet Inc. 26 Battery Park Ave Asheville, NC 28801	LOAN NUMBER	POLICY NUMBER OZID477585
	EFFECTIVE DATE 01/12/2019	EXPIRATION DATE 01/12/2020
	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:		

## PROPERTY INFORMATION

LOCATION/DESCRIPTION 26 Battery Park Ave, Asheville, NC 28801
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				X		SPECIAL	AMOUNT OF INSURANCE	DEDUCTIBLE
Business Personal Property including Tenants Improvements & Betterments Business Income & Extra Expense - 12 month actual loss sustained Spoilage Wind Included								409,500	500	
								25,000		

<b>REMARKS (Including Special Conditions)</b> 30 Day Notice of Cancellation
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<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
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<b>ADDITIONAL INTEREST</b>	<table border="1"> <tr> <td>NAME AND ADDRESS</td> <td>ADDITIONAL INSURED</td> <td>LENDER'S LOSS PAYABLE</td> <td>LOSS PAYEE</td> </tr> <tr> <td rowspan="2">Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI 49770</td> <td>MORTGAGEE</td> <td></td> <td></td> </tr> <tr> <td>LOAN #</td> <td colspan="2"></td> </tr> <tr> <td></td> <td colspan="3">AUTHORIZED REPRESENTATIVE <i>Becky Hart</i></td> </tr> </table>	NAME AND ADDRESS	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE	Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI 49770	MORTGAGEE			LOAN #				AUTHORIZED REPRESENTATIVE <i>Becky Hart</i>		
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