

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/22/2021

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. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in liqu of such endorsement(s).

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PRO	DUCER	CONTACT Theresa Manganello									
MARLIN INSURANCE AGENCY, INC.											399-7905
1138 WILLIAM FLOYD PKWY					E-MAIL theresa@marlinagency.com ADDRESS:						
PO BOX 434					INSURER(S) AFFORDING COVERAGE					NAIC#	
SHIRLEY NY 11967-0434					INSURER A: Merchants Insurance Group					23329	
INSURED					INSURER B: ShelterPoint Life Insurance Company						
	Practical Murphy Inc				INSURER C:						
	Dba Kilwins Of Patchogue				INSURER D :						
	74 East Main Street				INSURER E :						
	Patchogue			NY 11772-3102	INSURER F:						
COVERAGES CER			TIFICATE NUMBER: 21-Kilwins			REVISION NUMBER:					•
THIS IS TO CERTIFY THAT 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 CERTIFICATE 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.											
INSR LTR TYPE OF INSURANCE			SUBR POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		rs	
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRODUCT LOC OTHER:		В			12/07/2020	12/07/2021	EACH OCCURRENC	CE	\$ 2,00	00,000
								DAMAGE TO RENTE PREMISES (Ea occu		\$ 500,	,000
								MED EXP (Any one	person)	\$ 5,00	00
Α				BOPI088287				PERSONAL & ADV I	NJURY	\$	
								GENERAL AGGREG	SATE	\$ 4,000,000	
								PRODUCTS - COMP	P/OP AGG	\$ 4,00	00,000
								EPLI		\$ 100,000	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$			
	ANY AUTO							BODILY INJURY (Pe	r person)	\$	
	OWNED SCHEDULED AUTOS					, , ,			\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	iΕ	\$	
										\$	
	➤ UMBRELLA LIAB OCCUR							EACH OCCURRENC	CE	\$ 2,00	00,000
Α	EXCESS LIAB CLAIMS-MADE DED RETENTION \$ 10,000			CUP9147962		12/07/2020	12/07/2021	AGGREGATE		\$ 2,00	00,000
										\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER		
l A	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			WCA9099670	08/28/	08/28/2021	08/28/2022	E.L. EACH ACCIDEN	١T	\$ 1,00	00,000
``	(Mandatory in NH)	N/A						E.L. DISEASE - EA E		φ .	00,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POL	ICY LIMIT	\$ 1,00	00,000
В				DBL471464		08/28/2021	08/28/2022				
DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Kilwins Chocolate Franchise, Inc. and Kilwin's Quality Confections, Inc. are listed as Additional Insured on Primary and Non-Contributory basis with regards to General Liability, Automobile Liability and Umbrella. Waiver of Subrogation with regards to Workers' Compensation/Employers Liability, General Liability, Automobile Liability, Umbrella in favor of Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections, Inc. Company will endeavor to give 30 days notice of cancellation to certificate holder.											

CERTIFICATE HOLDER

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

Petoskey

MI 49770

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