



# CERTIFICATE OF LIABILITY INSURANCE

OP ID: DL  
DATE (MM/DD/YYYY)  
06/07/2017

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 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 lieu of such endorsement(s).

**PRODUCER**  
Schuberg Agency, Inc.  
107 N. Michigan Ave.  
Big Rapids, MI 49307  
Diane Leichly

**CONTACT** Tyler Schuberg  
**NAME:**  
**PHONE** (A/C, No. Ext): 231-796-5881 **FAX** (A/C, No):  
**EMAIL** ADDRESS: tyler@schubergagency.com  
**PRODUCER**  
**CUSTOMER ID #:** OLDP1-1

**INSURER(S) AFFORDING COVERAGE**

**NAIC #**

**INSURED**  
Old Pioneer Store & Emporium  
Carleen Rose  
118 N Michigan  
Big Rapids, MI 49307-1402

**INSURER A:** Auto-Owners/Home-Owners **26638**

**INSURER B:**

**INSURER C:**

**INSURER D:**

**INSURER E:**

**INSURER F:**

### COVERAGES

**CERTIFICATE NUMBER:**

**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	ADDITIONAL INSURER (LWD)	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXP. DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		9115516200	10/11/2017	10/11/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 300,000 MED EXP (any one person) \$ 10,000
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		9115516200	10/11/2017	10/11/2018	PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	Business Owners		9115516200	10/11/2017	10/11/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		9115516200	10/11/2017	10/11/2018	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
A	ANY AUTO		9115516200	10/11/2017	10/11/2018	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS		9115516200	10/11/2017	10/11/2018	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
A	UMBRELLA LIAB	<input checked="" type="checkbox"/>	5068666400	04/12/2017	04/12/2018	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	EXCESS LIAB	<input checked="" type="checkbox"/>	5068666400	04/12/2017	04/12/2018	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
A	DEDUCTIBLE		16005994	10/11/2017	10/11/2018	E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	RETENTION \$		16005994	10/11/2017	10/11/2018	E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES:** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Kilwins Chocolates Franchisne, Inc. and Kilwins Quality onfections, Inc are listed as additional insured on primary and non-contributory basis with regard to GL, Automobile, and Umbrella. Waiver of Subrogation with regards to WC, GL, Auto, 30 days notice of cancellation to Kilwins-reference store #8

### CERTIFICATE HOLDER

**KILWINS**

### 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.

**KILWINS CHOCOLATES FRANCHISE INC.**  
ADDITIONAL INSURED  
1050 Bay View Dr.  
Petoskey, MI 49770

**AUTHORIZED REPRESENTATIVE**

Diane Leichly

*Diane Leichly*

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