

CERTIFICATE OF LIABILITY INSURANCE

BHART DATE (MM/DD/YYYY)

SUNSSWE-01

									01/12/2018			
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 lieu of such endorsement(s).												
PRODUCER												
Olivier-VanDyk Insurance Agency, Inc. 2780 44th St SW Wyoming, MI 49519						PHONE (A/C, No, Ext): (616) 454-0800 FAX (A/C, No):(616) 4 E-MAIL ADDRESS:						
						INSURER(S) AFFORDING COVERAGE					NAIC #	
						INSURER A : The Hartford						
INSURED					INSURER B : INSURER C :							
	Sunshine Sweets, LLC 21 Middleton Dr				INSURER D :							
	Bedford, NH 03110				INSURER E :							
			INSURER F :									
COVER			-	ENUMBER:	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.										WHICH THIS		
	TYPE OF INSURANCE ADDL SUBR			POLICY NUMBER		POLICY EXP (MM/DD/YYYY)	' EXP					
A X	-			81SBAIK5238			01/12/2019	EACH OCCURRENC DAMAGE TO RENTE PREMISES (Ea occu	E	\$	1,000,000 1,000,000	
								MED EXP (Any one p		\$	10,000	
								PERSONAL & ADV II	NJURY	\$	1,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:								GENERAL AGGREG		\$	2,000,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP	OP AGG	\$	2,000,000	
Α								COMBINED SINGLE	LIMIT	\$\$	1,000,000	
		х	x	81SBAIK5238	01/	01/12/2018	01/12/2019	(Ea accident) BODILY INJURY (Per	r person)	<u>э</u> \$		
	OWNED SCHEDULED AUTOS	^						BODILY INJURY (Pe	r accident)	\$		
X	AUTOS ONLY X NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	E	\$		
										\$	4 000 000	
AX	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE	x	x	81SBAIK5238	01/	/12/2018	01/12/2019	EACH OCCURRENC	E	\$	1,000,000	
	DED RETENTION \$	^	^	010DAIR0200	0.7	12/2010	01/12/2013	AGGREGATE		\$	1,000,000	
	KERS COMPENSATION							PER STATUTE	OTH- ER	\$		
ANY	EMPLOYERS' LIABILITY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDEN		\$		
OFFI (Mar	ICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA E		\$		
If yes DES	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLI	CY LIMIT	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Kilwins Chocolates Franchise Inc. and Kilwins Quality Confections Inc. are additional insured on a primary & non-contributory basis with regards to general liability, auto liability and umbrella. Waiver of subrogation applies to general liability, auto liability and umbrella. A 30 day notice of cancellation applies.												
CERTIFICATE HOLDER						CANCELLATION						
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey, MI 49770						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 Beckystart						
) DE (D04 C/02)					0.40						

© 1988-2015 ACORD CORPORATION. All rights reserved.