

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/25/2019

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.

	SUBROGATION IS WAIVED, subject nis certificate does not confer rights to							require an endorsement	. A sta	atement on	
PRODUCER						CT					
Olivier-VanDyk Insurance Agency 2780 44th Street SW Wyoming MI 49519					NAME: PHONE (A/C, No, Ext): 616-454-0800 FAX (A/C, No): 616-454-7100						
					ADDRESS: certificates@ovdinsurance.com						
,, ,						INSURER(S) AFFORDING COVERAGE				NAIC#	
						INSURER A: Citizens Insurance Company				31534	
INSURED HARRCHO-01 Harris Chocolatiers, LLC					INSURER B:						
517 S Reuter Dr					INSURER C:						
Arlington Heights IL 60005					INSURER D:						
					INSURER E :						
						INSURER F:					
COVERAGES CERTIFICATE NUMBER: 1698426212						REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PER INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH TO CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TER EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. INSR POLICY EFF POLICY EXP										WHICH THIS	
INSR LTR	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER			POLICY EXP (MM/DD/YYYY)	LIMIT	s		
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			O7ID671382		9/1/2019	9/1/2020	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000		
								PREMISES (Ea occurrence)	\$3,000	,	
								MED EXP (Any one person)	\$ 10,00		
								PERSONAL & ADV INJURY	\$ 1,000	-	
	POLICY PROJECT LOC							GENERAL AGGREGATE	\$2,000		
								PRODUCTS - COMP/OP AGG	\$ 2,000	,000	
Α	OTHER: AUTOMOBILE LIABILITY			O7ID671382		9/1/2019	9/1/2020	COMBINED SINGLE LIMIT (Ea accident)	\$1,000	.000	
	ANY AUTO			0.1501.1002		0, ., 20 . 0	0/ 1/2020	BODILY INJURY (Per person)	\$,	
	OWNED SCHEDULED							,	\$		
	X HIRED X NON-OWNED							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Fer accident)	\$		
Α	X UMBRELLA LIAB X OCCUR			O7ID671382		9/1/2019	9/1/2020	EACH OCCURRENCE	\$ 1,000	,000	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$1,000	,000	
	DED RETENTION\$								\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			W2ID671368		9/1/2019	9/1/2020	X PER OTH-ER			
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$ 1,000	,000	
	(Mandatory in NH)	III / A						E.L. DISEASE - EA EMPLOYEE	\$ 1,000	,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$1,000	,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 148 N York St, Elmhurst, IL 60126 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 workers' compensation, general liability, auto liability and umbrella. 30 day notice of cancellation applies.											
CE	RTIFICATE HOLDER		CANC	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. AUTHORIZED REPRESENTATIVE					
	Petoskey MI 49770					Cook ad land					