

## **EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 5/28/2024

5/28/2024 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. PHONE (A/C, No. Ext): 616-454-0800 Citizens Ins Co Of Amer **OVD Grand Rapids** 808 North Highlander Way 2780 44th St SW Howell, MI 48843 Wyoming, MI 49519 E-MAIL ADDRESS FAX (A/C, No): 616-454-7100 CODE: SUB CODE: AGENCY CUSTOMER ID #: INSURED I OAN NUMBER POLICY NUMBER Lizzybell Sweets, LLC Z2IH941601 1401 Tradewind St Grapevine TX 76051 FFFFCTIVE DATE **EXPIRATION DATE** CONTINUED UNTIL TERMINATED IF CHECKED 04/15/2024 04/15/2025 THIS REPLACES PRIOR EVIDENCE DATED: PROPERTY INFORMATION LOCATION/DESCRIPTION Location 1: 338 S Main St, Grapevine, TX 76051 Location 2: 323 S 6th St, Waco, TX 76701 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** BROAD SPECIAL DEDUCTIBLE COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE Location 1: Business Personal Property & Tenants Betterments & Improvements - Replacement Cost 534.600 500 Location 2: Business Personal Property & Tenants Betterments & Improvements - Replacement Cost 390,000 500 Business Income - 12 months ALS 25.000 Spoilage Wind Included **REMARKS (Including Special Conditions)** 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. ADDITIONAL INTEREST NAME AND ADDRESS ADDITIONAL INSURED Х LENDER'S LOSS PAYABLE LOSS PAYEE MORTGAGEE LOAN # First Commonwealth Bank ISAOA/ATIMA Insurance Purchasing Dept AUTHORIZED REPRESENTATIVE PO Box 400 LVIVE Indiana, PA 15701

ACORD 27 (2016/03)

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