



OP ID: JM

**EVIDENCE OF PROPERTY INSURANCE**DATE (MM/DD/YYYY)  
12/11/2017

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.

AGENCY King Insurance Agency 308 State Street Petoskey, MI 49770 Julia E. Makela		PHONE (A/C, No, Ext): 231-347-9062		COMPANY Home Owners Insurance Co. PO Box 30660 Lansing, MI 48909-8160	
FAX (A/C, No): 231-347-9063		E-MAIL ADDRESS: mail@kinginsagency.com			
CODE: 010865		SUB CODE:			
AGENCY CUSTOMER ID #: KILWIN2					
INSURED  Kilwin's of Boyne City Thomas & Gayle Harbaugh 3545 Thunder Road Boyne City, MI 49712		LOAN NUMBER		POLICY NUMBER 4109537100	
		EFFECTIVE DATE 07/03/17		EXPIRATION DATE 07/03/18	
				<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:					

**PROPERTY INFORMATION**

LOCATION/DESCRIPTION 102 Water St Boyne City, MI 49712--124	CANDY/CONFECTION STORE-CONSUMP ON-PREM
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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
COVERAGE / PERILS / FORMS			
Business Betterment & improvement			
Business Personal Property			
Spoilage due to breakdown/contamination/power outa			
Replacement Cost Basis			
Special Coverage Form			
30 Day Notice of Cancellation			
Loss of Business Income & Expense Actual Loss Su			
			AMOUNT OF INSURANCE
			185,000
			205,000
			10,000
			12 Months
			DEDUCTIBLE
			1000
			1000
			1000

**REMARKS (Including Special Conditions)**

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**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  Kilwins Chocolates Franchise Inc & Kilwins Quality Confect 1050 Bay View Road Petoskey, MI 49770	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	MORTGAGEE	X	
	LOAN #		
	AUTHORIZED REPRESENTATIVE Julia E. Makela 		