

SUMMARY OF DECLARATIONS

Policy #: PPK0001002-15

NAMED INSURED AND MAILING ADDRESS:

Sharrak Investments, Inc.

1848 Springwells St Detroit, MI 48209 PRODUCER:

Morris Insurance Group Inc

22440 Hall Road

Clinton Township, MI 48036

The policy period is from 02/04/2015 to 02/04/2016 12:01 A.M. Standard Time at the mailing address shown.

BUSINESS DESCRIPTION: Liquor Store

INSURED IS: Corporation

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED, THIS PREMIUM MAY BE SUBJECT TO AN AUDIT.

COVERAGE PARTS		PREMIUM
COMMERCIAL GENERAL LIABILITY	\$	2,308
COMMERCIAL PROPERTY	\$	5,390
COMMERCIAL CRIME	\$	Excluded
COMMERCIAL INLAND MARINE	\$	Excluded
COMMERCIAL AUTO	\$	100
то	TAL POLICY PREMIUM \$	7,798

Commercial Filing Exemption-This policy is exempt from the filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA 218, MCL 500.2236.

Form(s) and Endorsement(s) made part of this policy at the time of issue:

These Declarations and the Common Policy Declarations, if applicable, together with the Common Policy Conditions, Coverage Form(s) and Endorsements, if any, issued to form a part thereof, complete the above numbered policy.

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DATE

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PO-SUM-DEC (06/12) Page 1



COMMERCIAL PROPERTY DECLARATIONS

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These declarations must be completed by the attachment of additional declarations or supplements and policy provisions for each applicable coverage.

LOC	BLDG	Occupanc	Occupancy and Location					
1	1	1848 Springwells St. Detroit MI48209 occupied as Grocery						
COVERAG	追!	NIT OF IRANCE	VALUATION	CO- INS	COVERED CAUSE OF LOSS	THEFT	DEDUCTIBLE	PREMIUM
Building		450,000	RC	100%	Special	Yes	5,000	Included
BPP		183,600	RC	100%	Special	Yes	5,000	Included
Earning		100,000	-	-	Special	Yes	-	Included
-		-	-	-	-	-	-	-
-		-	-	-	-	-	-	-
-		-	-	-	-	-	-	-

MONTHLY LIMIT OF INDEMNITY

*Applies to Business Income Only * Ext. Period of Indemnity

MORTGAGE HOLDER(S) AND MAILING ADDRESS

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PO-CP-DEC (06/12) Page 2



GENERAL LIABILITY DECLARATIONS

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Clinton Township, MI 48036

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LIMITS OF INSURANCE

General Aggregate Limit	\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000
Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit	\$1,000,000
Fire Damage Limit (Damage To Premises Rented To You Limit)	\$50,000
Medical Expense Limit	\$5,000
ALL PREMISES YOU OWN,	RENT OR OCCUPY

Location Address of all Premises you Own, Rent, or Occupy

1 1848 Springwells St., Detroit, Ml. 48209

Location	Classification	Code No.	Premium Basis	Premium
1	Grocery	13673	\$1,039,746 Sales	Included

Audit Period (if applicable) -- Annually

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PO-GL-DEC (06/12) Page 3



COMMERCIAL AUTO DECLARATIONS

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Morris Insurance Group Inc

22440 Hall Road

Clinton Township, MI 48036

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Coverage	Covered Autos	Limit (The most we will pay for any on Accident of Loss)	Premium
Liability	8, 9	1,000,000	Included
Personal Injury Protection (PIP) (or equivalent No-Fault Coverage)	Excluded	Separately Stated in each PIP Endorsement(s) minus \$	N/A
Added PIP (or equivalent No-Fault Coverage)	Excluded	Separately in each added PIP Endorsement(s)	N/A
Property Protection Insurance (PPI) (Michigan Only)	Excluded	Separately Stated in each PPI Endorsement minus Deductible for each Accident	N/A
Auto Medical Payments	Excluded		N/A
Uninsured Motorists (UM)	Excluded		N/A
Uninsured Motorists (when not included in UM Coverage Physical Damage	Excluded		N/A
Comprehensive Coverage	Excluded		N/A
Special Causes of Loss Coverage	Excluded		N/A
Collision Coverage	Excluded		N/A
Towing and Labor	Excluded		N/A
orm(s) and Endorsement(s) made part	of this policy at	the time of issue:	

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PO-CA-DEC (06/12) Page 5