

Policy#: PPK0001003-15

NAMED INSURED AND MAILING ADDRESS:
Motor City Truck Plaza, LLC
Motor City Truck Plaza

Motor City Truck Plaza 377 Schaefer Hwy

PRODUCER:

Fawaz Insurance Agency Inc.

25649 Ford Road.

Detroit, MI 48217			Dearborn Heights, MI 48127			
The policy period is	from <u>02/04/2015</u> to <u>02</u>	<u>/04/2016</u> 12:01	A.M. Standard Tim	ne at the mailing a	address shown.	
BUSINESS DESCRIPTION: Ser	vice Station with C Sto	ore				
INSURED IS: LLC						
THIS POLICY CONSISTS OF T MAY BE SUBJECT TO AN AUD		VERAGE PARTS	FOR WHICH API	REMIUM IS INDIC	ATED, THIS PREMIU	М
CO/	/ERAGE PARTS			PR	REMIUM	
COMMERCIAL GEN	IERAL LIABILITY			\$	4,562	
COMMERCIAL PRO	PERTY			\$	3,685	
COMMERCIAL CRI	ME			\$	300	
COMMERCIAL INLA	AND MARINE			\$	Excluded	
COMMERCIAL AUT	0			\$	Excluded	
		TOTAL PO	OLICY PREMIUM	\$	8,547	
1956 PA 218, MCL 500.2236. Form(s) and Endorsement(s) i	made part of this polic	y at the time of	issue:			
These Declarations and the Co Form(s) and Endorsements, if					icy Conditions, Cove	rage
COUNTERSIGNED:	3/05/2015	I	BY:			
PO-SUM-DEC (06/12)	DATE		AUTHO	RIZED REPRESE	NTATIVE Page	e 1

26602 Haggerty Rd, Farmington Hills, MI 48331 Phone 877.714.6726 Fax 248.536.1860 primeoneinsurance.com



COMMERCIAL PROPERTY DECLARATIONS

Policy #: PPK0001003-15

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LOC	BLDG	Occupan	Occupancy and Location					
1	1	377 Schaefer Hwy Detroit Ml48217 occupied as Grocery						
COVERAG	ΕΙ.	IT OF RANCE	VALUATION	CO- INS	COVERED CAUSE OF LOSS	THEFT	DEDUCTIBLE	PREMIUM
Building		400,000	RC	90%	Special	Yes	1,000	Included
BPP		125,000	RC	90%	Special	Yes	1,000	Included
Earning		60,000	-	-	Special	Yes	-	Included
-		-	-	-	-	-	-	-
Pumps		100,000	-	-	Special	Yes	-	Included
Canopies		120,000	-	-	Special	Yes	-	Included
MONTHLY LIMIT OF INDEMNITY *Applies to Business Income Only * Ext. Period of Indemnity								

f Indemnity
ns, Coverage

DATE

AUTHORIZED REPRESENTATIVE

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GENERAL LIABILITY DECLARATIONS

Policy #: PPK0001003-15

NAMED INSURED	AND MAILING ADDRESS:	
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Motor City Truck Plaza, LLC Motor City Truck Plaza 377 Schaefer Hwy Detroit, MI 48217

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Dearborn Heights, MI 48127

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

LIMITS OF INSURANCE

Medical Expense Limit	\$5.000 \$5.000
Fire Damage Limit (Damage To Premises Rented To You Limit)	\$50,000
Personal & Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000
General Aggregate Limit	\$2,000,000

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

377 Schaefer Hwy, Detroit, Ml. 48217

Location	Classification	Code No.	Premium Basis	Premium
1	Grocery	13673	\$450,000 Sales	Included
2	Building or Premises LRO	61212	\$1,500 Area	Included

Audit Period (if applicable) -- Annually

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

These Declarations and the 0 Form(s) and Endorsements,			er with the Common Policy Cond above numbered policy.	tions, Coverage
COUNTERSIGNED:	3/05/2015	BY:		
	DATE	ΔI	LITHORIZED REPRESENTATIVE	

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26602 Haggerty Rd, Farmington Hills, MI 48331 Phone 877.714.6726 Fax 248.536.1860 primeoneinsurance.com



COMMERCIAL CRIME DECLARATIONS

Policy #: PPK0001003-15

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PRODUCER:

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Dearborn Heights, MI 48127

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

_		Limit Per	-	
Coverage		Occurrence	Deductible	Premium
Employee Theft		-	-	-
Forgery or Alteration		-	-	-
Inside the Premises - Thef Securities	t of Money and	5,000	1,000	Included
Outside the Premises - Ro	bbery	5,000	1,000	Included
Inside the Premises - Safe	Burglary	10,000	1,000	Included
Premises Burglary Form(s) and Endorsement(s		10,000	1,000	Included
These Declarations and the Form(s) and Endorsements	Common Policy Declar , if any, issued to form a	rations, if applicable, toge part thereof, complete th	ether with the Common Poline above numbered policy.	cy Conditions, Coverag
COUNTERSIGNED:	3/05/2015	BY:		
	DATE		AUTHORIZED REPRESEI	NTATIVE
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