



## SUMMARY OF DECLARATIONS

Policy #: PPK0001001-15

**NAMED INSURED AND MAILING ADDRESS:**

Pop & Tereza, Inc.

5805 Mt. Elliot  
Detroit, MI 48211

**PRODUCER:**

Primary Insurance Agency

2071 E. 15 Mile Rd.  
Sterling Heights, MI 48310

The policy period is from 02/02/2015 to 02/02/0016 12:01 A.M. Standard Time at the mailing address shown.

**BUSINESS DESCRIPTION:**

**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	\$	3,292
COMMERCIAL PROPERTY	\$	9,076
COMMERCIAL CRIME	\$	Excluded
COMMERCIAL INLAND MARINE	\$	Excluded
COMMERCIAL AUTO	\$	Excluded
TOTAL POLICY PREMIUM		\$ 12,368

Commercial Filing Exemption- This policy is exempt from the filing requirements of Section 2236 of the Insurance Code of 1956, 1956 PA218, MCL 500.2236.

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

IL0003(9/08) IL0017(11/98) IL0286(9/08) IL0030(1/06) IL0031(1/06)

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.

COUNTERSIGNED:

BY:

DATE

AUTHORIZED REPRESENTATIVE

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## 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	Occupancy and Location						
1	1	5805 Mt. Elliot Detroit MI48211 occupied as Restaurant						
COVERAGE	LIMIT OF INSURANCE	VALUATION	CO-INS	COVERED CAUSE OF LOSS	THEFT	DEDUCTIBLE	PREMIUM	
Building	400000.0	RC	80%	Special	Yes	2500.0	Included	
BPP	400000.0	RC	80%	Special	Yes	2500.0	Included	
Earning	200000.0	-	-	Special	Yes	-	Included	
Sign	25000.0	RC	80%	Special	Yes	2500.0	Included	
-	-	-	-	-	-	-	-	
-	-	-	-	-	-	-	-	

MONTHLY LIMIT OF INDEMNITY

@policy.locations.first.buildings.first.indemnity

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

**MORTGAGE HOLDER(S) AND MAILING ADDRESS**

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

CP0010(6/07) CP0090(7/88) CP0120(1/08) CP0140(7/06) CP1032(8/08) IL0935(7/02) IL0953(1/08) CP1270(9/96)

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## GENERAL LIABILITY DECLARATIONS

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Primary Insurance Agency

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Sterling Heights, MI 48310

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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)	\$300,000
Medical Expense Limit	\$5,000

**ALL PREMISES YOU OWN, RENT OR OCCUPY**

Location	Address of all Premises you Own, Rent, or Occupy
1	5805 Mt. Elliot, Detroit, MI. 48211

Location	Classification	Code No.	Premium Basis	Premium
1	Restaurant	16814	550000.0 Sales	Included

Audit Period (if applicable) -- Annually

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

CG0001(12/07) CG0068(5/09) CG0099(11/85) CG0168(12/4) CG2101(11/85) CG2146(7/98) CG2147(12/07) CG2149(9/99)  
CG2167(12/04) CG2175(6/08) CG2190(1/06) CG2231(7/98) CG2258(11/85) CG2407(1/96) IL0021(9/08) PO-GL-5(5/12) PO-GL-6(5/12)

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COUNTERSIGNED:

BY:

DATE

AUTHORIZED REPRESENTATIVE

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