AMERICA'N STATES INSURANCE COMPANY

093868

INDIANAPOLIS, INDIANA LICENSE OR PERMIT RON

DUPLICATE ORIGINAL EX 770-239

LICENSE ON PERMIT BOND 2. 1/6 233
KNOW ALL MEN BY THESE PRESENTS, That weVANDYKE_CONSTRUCTION,INC.
1649 Muirfield - SCHERERVILLE, In 46375
as Principal, and the AMERICAN STATES INSURANCE COMPANY, with its principal office at
Indianapolis, Indiana, as Surety, are held firmly bound unto All_cities, towns, and
municipalities_in_Lake_County,_In, hereinafter called Obligee, in
the penal sum ofFIVE_THOUSAND_AND_NO/100
\$_5,000.00 Dollars, for the payment of which well and truly to be made we do hereby
bind ourselves, our heirs, executors, adminstrators, successors and assigns, jointly and severally,
firmly by these presents.

WHEREAS, the said Obligee has granted or is about to grant to the said Principal a License or Permit to engage in the business of General Contractor

NOW THEREFORE, if the said Principal shall indemnify the Obligee against any loss directly arising by reason of the failure to comply with the laws, ordinances, resolutions, rules, and regulations governing said business, then this obligation shall be void, otherwise to be and remain in full force and effect.

PROVIDED, HOWEVER, that the Surety shall have the right to terminate its liability hereunder by serving written notice upon the Obligee confliction days in advance of its intention to do so.

Term of Bond: ____

Signed and sealed this

December 31

19 <u>89</u>, to

December 31

19 90



VANDYKE CONSTRUCTION, INC.

Principal

AMERICAN STATES INSURANCE COMPANY

Linda S. Ping

Attorney-in-Fact



9-1459 (7-88)

American States Insurance Company INDIANAPOLIS, INDIANA

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	LINDA S. PING			
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Indianapolis	and State of	In	diana	alaan ladaa aad
true and lawful Attorney(s)-in-Fact, with full power an				
liver any and all bonds, recognizances, contracts of inde	emnity and other conditional or	r obligatory undertaking	s. provided, h	owever,
that the penal sum of any one suc	h instrument exec	uted_hereunde:	r_shall_not_ex	ceed
FIVE HUNDRED THOUSAND AND NO/100 d to bind the Corporation thereby as fully and to the same proporation and duly attested by its Secretary, hereby rainful torney is executed and may be revoked pursuant to and be nich reads as follows: "The Chairman, the President or any vice president or Assistant Vice President) shall have power, by and	me extent as it such bonds well lying and confirming all that the by authority granted by Section	re signed by the Preside said Attorney(s)-in-Faction By-Laws of the By-Laws of th	dent, sealed with the cor ct may do in the premise the American States Insu	mmon seal of the es. This Power of grance Company,
Fact as the business of the Corporation may require recognizances, stipulations and undertakings wheth IN WITNESS WHEREOF, American States Insurance	e and to authorize any such per her by way of sufety or otherw e-Company has caused these	rson to execute, on behings to present to be signed executed.	natified the Corporation, a feed by its Vice-President	ny bonds,
ssistant Secretary and its corporate seal to be hereto aff	fixed this 7th day of		November	
TTEST Assistant Secretary	By _	RICAN STATES INSUR	ANCE COMPANY Dand Vice-President	· •••——(**)
TATE OF INDIANA OUNTY OF MARION THE STATE OF INDIANA	THE REAL PROPERTY.		9 5	
On this 7th day of	November	, A.D	., 19.88 before me	personally came
eing by me duly sworn, acknowledged the execution of the a	Joseph F. Heim	a and saw that ha is a V	, to	me known, who
empany: that he knows the seal of said Corporation; that the Board of Directors of said Corporation; and that he	the seal attived to the said inst	frument is such corpora	ale seal: that it was so at	nixed by authorit
Joseph F. Heim further said that	VOLANA 15		bel and kno	
ssistant Secretary of said Corporation; and that he execu	uted the above instrument.	1//	5 70	
DECEMBER 2, 1990		Sattleen		
My Commission Expires			Notary Public	(;
TATE OF INDIANA OUNTY OF MARION } SS				`
i, Alanson T. Abel , the above and foregoing is a true and correct copy of a Poliforce and effect. This Certificate may be signed and sealed by facsimile	ower of Attorney, executed by a under and by the authority of S	Section 8.03 of the By-L ed on behalf of the Corp	aws of AMERICAN STA	TES INSURANCE , the President Vice President)
OMPANY which reads as follows: "All policies and other instruments of insurance issued b or any vice-president (including any Executive Vice President the secretary, or an assistant secretary, or other office of the Corporation, may be facsimilies. Such signatures the fact that any such officer shall have ceased to be substituted by the Corporation."	ident, Senior Vice President, Vice icer, whose signatures, if the ins and facsimiles thereof shall be such officer at the time such po	strument is duly counter authorized and binding plicy or other instrument	signed by an authorized pupon the Corporation not t of insurance shall have	representative otwithstanding
OMPANY which reads as follows: "All policies and other instruments of insurance issued b or any vice-president (including any Executive Vice Presic and the secretary, or an assistant secretary, or other offic of the Corporation, may be facsimilies. Such signatures the fact that any such officer shall have ceased to be si	ident, Senior Vice President, Vice icer, whose signatures, if the ins and facsimiles thereof shall be such officer at the time such po	strument is duly counter authorized and binding plicy or other instrument	signed by an authorized pupon the Corporation not t of insurance shall have	representative otwithstanding