

094302



402 Park St  
Ct Pt 46307

# Western Surety Company

## LICENSE AND PERMIT BOND

For County, City, Town or Village Only-Not Valid for Bonds Required by the State.  
Not Valid for Contract, Performance, Maintenance, Subdivision or Utility Guarantee Bond.

KNOW ALL MEN BY THESE PRESENTS:

BOND No. L & P. 4142829

STATE OF INDIANA/S.S. NO.  
LAKE COUNTY  
FILED FOR  
APR 9 1 28 PM '90  
ROBERT G. JONES  
RECORDER

That we, TEDD EVANS  
of the CITY of CROWN POINT, State of INDIANA as Principal,  
and WESTERN SURETY COMPANY, a Corporation duly licensed to do business in the State  
of INDIANA, as Surety, are held and firmly bound unto the  
ALL CITIES, TOWNS & MUNICIPALITIES of LAKE COUNTY, State of INDIANA, Obligee, in the amount  
(Valid only when a County, City, Town or Village is named as Obligee)

of FIVE THOUSAND (\$ 5,000.00 ) DOLLARS,  
(NOT VALID FOR MORE THAN \$25,000)

lawful money of the United States, to be paid to the said Obligee, for which payment well and truly  
to be made, we bind ourselves and our legal representatives, jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, That whereas, the Principal has been  
licensed TREE TRIMMING CONTRACTOR

by the Obligee.  
NOW THEREFORE, if the Principal shall faithfully perform the duties and comply with the laws and  
ordinances (including all amendments), pertaining to the license or permit, then this obligation to be void,  
otherwise to remain in full force and effect for a period commencing on the 29th day of  
MARCH, 1990, and ending on the 31st day  
of DECEMBER, 1991, unless renewed by continuation certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing to the Obligee and to  
the Principal, in care of the Obligee or at such other address as the Surety deems reasonable, and at the expira-  
tion of thirty-five (35) days from the mailing of notice or as soon thereafter as permitted by applicable law,  
whichever is later, this bond shall terminate and the Surety shall be relieved from any liability for any subsequent  
acts or omissions of the Principal.

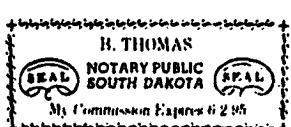
Dated this 29th day of MARCH, 1990

Countersigned  
By [Signature]  
Resident Agent

WESTERN SURETY COMPANY  
By [Signature]  
Principal  
President

ACKNOWLEDGMENT OF SURETY  
(Corporate Officer)

STATE OF SOUTH DAKOTA }  
County of Minnehaha } ss  
On this 29 day of Mar, 1990, before me, the undersigned officer, personally  
appeared Joe P. Kirby, who acknowledged himself to be the aforesaid officer of WESTERN  
SURETY COMPANY, a corporation, and that he as such officer, being authorized so to do, executed the foregoing  
instrument for the purpose therein contained, by signing the name of the corporation by himself as such officer.  
IN WITNESS WHEREOF, I have hereunto set my hand and official seal.



[Signature]  
Notary Public, South Dakota  
Western Surety Company  
1-605-336-0850

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ACKNOWLEDGMENT OF PRINCIPAL  
(Individual or Partners)

STATE OF Indiana  
County of DelCo } ss

On this 29 day of May, 1990, before me personally appeared  
Tedd J. Evans

known to me to be the individual described in and who executed the foregoing instrument and  
acknowledged to me that he executed the same.

My commission expires  
WILLIAM E. CARPENTER  
NOTARY - CROWN POINT, IN  
EXP. 9-26 91

~~Document is~~  
~~NOT OFFICIAL!~~  
~~AGNOWLEDGMENT OF PRINCIPAL~~  
~~(Corporate Officer)~~  
~~This Document is the property of~~  
~~the Lake County Recorder!~~



STATE OF \_\_\_\_\_  
County of \_\_\_\_\_ } ss

On this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, before me,  
personally appeared \_\_\_\_\_, who acknowledged himself to be the  
\_\_\_\_\_ of \_\_\_\_\_, a corporation,  
and that he as such officer being authorized so to do, executed the foregoing instrument for the pur-  
poses therein contained by signing the name of the corporation by himself as such officer.

My commission expires \_\_\_\_\_, 19\_\_\_\_  
Notary Public



Western Surety Company  
License or Permit No. \_\_\_\_\_  
**LICENSE AND PERMIT BOND**  
As \_\_\_\_\_  
of \_\_\_\_\_  
State of \_\_\_\_\_ Name of Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
Filed \_\_\_\_\_, 19\_\_\_\_  
Approved this \_\_\_\_\_  
day of \_\_\_\_\_, 19\_\_\_\_