

94031203

LICENSE OR PERMIT BOND

QL1 - 141-424489-074

KNOW ALL PERSONS BY THESE PRESENTS:

That Armit/C.F.S., Inc., P.O. Box 114, South Holland, IL 60473-0114,  
as Principal, (hereinafter called the Principal), and LIBERTY MUTUAL INSURANCE COMPANY, a corporation of the Commonwealth of Massachusetts, with its Home Office in Boston, Massachusetts, and authorized to do business in all states, Surety (hereinafter called the Surety), are held and firmly bound unto Municipality of Lake County Indiana, 2293 North Main, Crown Point, IN 46307,

as Obligee, (hereinafter called the Obligee), in the sum of Five Thousand Dollars (\$5,000.00) for which payment, well and truly to be made, the Principal and Surety hereby bind themselves, their respective legal representatives, successors and assigns, jointly and severally, firmly by these presents.

Signed, sealed and dated this 21st day of April 19 94

WHEREAS, the principal has applied the Obligee for a license to apply for electrical license.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, That if the Principal shall indemnify the Obligee against all loss to it caused by the Principal's breach of any ordinance, rule or regulation relating thereto then the above obligation shall be void, otherwise to be and remain in full force and effect.

PROVIDED, the liability of the Surety upon this bond shall be and remain in full force and effect for the full period of the certificate or license, and renewals thereof, issued to the Principal, or until ten days after receipt by the Obligee of written notice from the Surety, stating that the liability of the Surety is thereby terminated and canceled and provided further, that nothing herein shall affect any right or liabilities which shall have accrued under this bond prior to the date of such termination. Claims must be presented in writing to Liberty Mutual Insurance Company, 100 Main Street, Dover NH 03820 to the attention of the Home Office Surety Claims Examiner.

WITNESS:

\_\_\_\_\_  
(If Individual or Firm)

Armit/C.F.S., Inc.  
(Company Name)  
Joseph G. Gall  
(Signature)

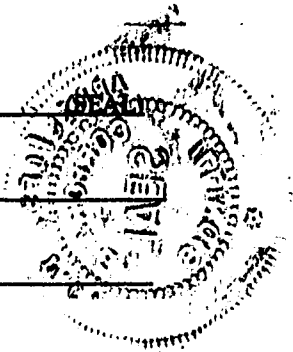
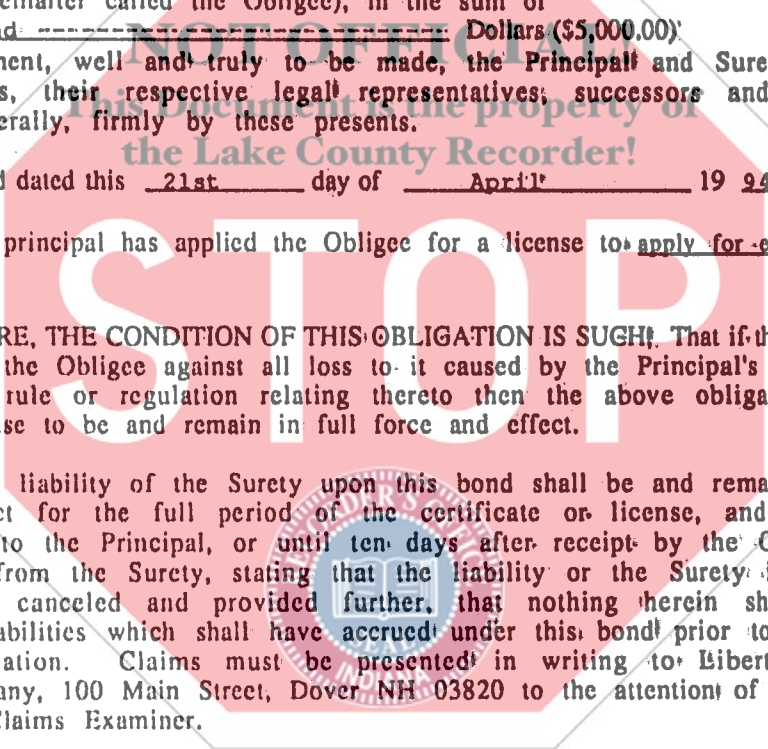
Andrew A. Adom  
(If Corporation)

Joseph G. Gall  
(Type name)  
General Manager

LIBERTY MUTUAL INSURANCE COMPANY  
BY Holly Budd  
Holly Budd Attorney in Fact

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STATE OF INDIANA  
CLERK OF SUPERIOR COURT  
APR 26 9 45 AM '94  
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