LICENSE AND/OR PERMIT BOND

Bond No. NBE 36528

KNOW ALL MEN BY THESE PRESENTS:

THAT: REGIONAL ENVIRONMENTAL SERVICES, INC. (hereinafter called the Principal) and NATIONAL AMERICAN INSURANCE COMPANY, an Insurance Company of the State of NEBRASKA, (hereinafter called the Surety) are held and firmly bound unto CITY OF EAST CHICAGO (hereinafter called the Obligee) in the sum of FFVE THOUSAND AND NO/100 DOLLARS (\$5,000.00) to the payment of which sum the said Principal and Surety bind themselves and their heirs, administrators, executors, successors, and assigns, jointly and severally, under the terms stated below. In consideration thereof, the Principal is granted a License and/or Permit by the Obligee to engage in the business of ASBESTOS ABATEMENT CONTRACTOR in the CITY OF EAST CHICAGO for the period beginning on the IST day of SEPTEMBER, 1995, and ending on the IST day of SEPTEMBER, 1996. the Lake County Recorder!

THEREFORE, the condition of this bond is that, if the Principal shall comply with all the conditions of the ordinances and regulations of the Obligee pertaining to said License, and shall indemnify and save harmless the Obligee from all damages which the Obligee shall sustain by reason of the failure of the said Principal to comply with all of the conditions of said ordinances and regulations, then this obligation shall be null and void, otherwise to remain in full force and effect, subject to the following conditions:

- 1. This obligation may be extended from year to year at the option of the Surety by Continuation Certificate executed by Surety.
- 2. This obligation may be cancelled by the Storety upon giving thirty (30) days written notice to the Obligee. However, this obligation shall remain in full force and effect as to the acts or omissions of the above mentioned Principal prior to the cancellation of the bond.

Signed and scaled this 1ST day of SEPTEMBER, 1995

REGIONAL ENVIRONMENTAL SERVICES, INC. NATIONAL AMERICAN INSURANCE CO.

ILA DELMAN

Attorney-in-fact

STATE OF ILLINOIS)
COUNTY OF COOK)

I, JOANNE M. LOCATI, a Notary Public of Cook County, State of Illinois, do hereby certify that ILA DELMAN, Attorney-in-Fact of NATIONAL AMERICAN INSURANCE COMPANY, who is personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she signed, sealed and delivered said instrument for and on behalf of NATIONAL AMERICAN INSURANCE COMPANY for the uses and purposes therein set forth.

Given under my hand and notarial seal at my office at Skokie, Illinois, in said county, this 1st day of September, 1995, A.D.

the Lake County Recorder!
JOANNE M LOCATI

My commission expires

MY COMMISSION - AMRES:05/20/98



NATIONAL AMERICAN INSURANCE COMPANY OMAHA, NEBRASKA

POWER OF ATTORNEY

ORIGINALS OF THIS POWER OF ATTORNEY ARE PRINTED ON YELLOW SAFETY PAPER WITH BROWN INK, DUPLICATES SHALL HAVE THE SAME FORCE AND EFFECT AS AN ORIGINAL ONLY WHEN ISSUED IN CONJUNCTION WITH THE ORIGINAL.

KNOW ALL MEN BY THESE PRESENTS: That the National American Insurance Company, a corporation duly organized under the laws of the State of Nebraska, having its principal office in the city of Chandler, Oklahoma, pursuant to the following resolution, adopted by the Board of Directors of the said Company on the 8th day of July, 1987, to wit:

"Resolved, that any officer of the Company shall have authority to make, execute and deliver a Power of Attorney constituting as Attorney-in-Fact, such persons, firms, or corporations as may be selected from time to time

Resolved that nothing in this Power of Attorney shall be construed as a grant of authority to the attorney(s)-in-fact to sign, execute, acknowledge, deliver or otherwise issue a policy or policies of insurance on behalf of National American Insurance Company

Be It Further Resolved, that the signature of any officer and the Seal of the Company may be affixed to any such Power of Attorney or any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such fac simile signature or facsimile seal shall be valid and binding upon the Company and any such powers so executed and certified by facsimile signature and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond

and documents relating to such bonds to which it is attached. Insurance Company does hereby make, constitute and appoint

NUMBER NBE 036528

NAME, ADDRESS -CITY, STATE, ZIP PRINCIPAL:

Regional Environmental Services, Inc. 2235-37 Summer Street Hammond, Indiana 46320

EFFECTIVE DATE

September 1, 1995

CONTRACT AMOUNT

s N/A

BOND AMOUNT

5,000.00

This Document is the property of Ila Delman of Skokie, Xilinois the Lake County Recorder!

its true and lawful attorney(s)-in-fact, with full power and authority hereby conferred in its name, place and stead, to sign, execute, acknowledge and deliver in its behalf, and its act and deed, as follows:

The obligation of the Company shall not exceed one million (\$1,000,000,00) dollars

And to bind National American Insurance Company thereby as fully and to the same extent as if such bonds and documents relating to such bonds were signed by the duly authorized officer of the National American Insurance Company, and off the authorized officer of the National American Insurance Company, and off the authorized officer of the National American Insurance Company, and off the authorized officer of the National American Insurance Company, and off the authorized officer of the National American Insurance Company, and off the Authorized officer of the National American Insurance Company, and off the Authorized officer of the National American Insurance Company, and off the Authorized officer of the National American Insurance Company, and off the Authorized officer of the Authorized officer of the National American Insurance Company, and officer of the Authorized Officer of the National American Insurance Company, and officer of the Authorized Officer of the National American Insurance Company, and officer of the Authorized Officer of the Insurance Company (Insurance Company). ratified and confirmed

IN WITNESS WHEREOF, the National American Insurance Company has caused these presents to be signed by any officer of the Company and its Corporate Seal to be hereto affixed.

ATIONAL AMÉRICAN INSURANCE COMPAÑY

W. Brent/LaGere, Chairman & Chief Executive Officer

STATE OF OKLAHOMA) COUNTY OF LINCOLN

STATE OF OKLAHOMA)

COUNTY OF LINCOLN

On this 8th day of July, A.D. 1987, before me personally came W. Brent LaGere, to me known, who being by me duly sworn, did depose and say; that he resides in the County of Lincoln, State of Oklahoma; that he is the Chairman and Chief Executive Officer of the National American Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of said corporation: that the seal affixed to the said instrument is such corporate seal: that it was so affixed by order of the Board of Directors of said corporation and that he signed his name, thereto by like order.

ANICAN INSUATE

Notary Public

My Commission Expires August 30, 1995

I, the undersigned, Assistant Secretary of the National American Insurance Company, A Nebraska Corporation, DO HEREBY CERTIFY that the foregoing and attached POWER OF ATTORNEY remains in full force.

Signed and Sealed at the City of Chandler.

day of September, 19 95

Winifred E. Mendenhall, Assistant Secretary