# ALLSTATE INSURANCE COMPANY HOME OFFICE - NORTHBROOK, ILLINOIS

### LICENSE AND PERMIT BOND

No. 074-021 733 SB

of 2519 NAPLES DR.	COMEDED/ALE IN ACCOR
hereinafter called the Principal) as Princip	SCHERERVILLE IN 46375 pal, and ALLSTATE INSURANCE COMPANY
	ransact business in the State of INDIANA (hereinafter called the Surety)
Surety, are held and firmly bound unto	(in silings in the state of the state)
ITY OF HAMMOND	<u>, e para la la</u>
ereinafter called the Obligee) as Obligee	e, in the penal sum of
VE THOUSAND AND 00/100	(\$ <u>5,000.00</u> ) Dollars,
wful money of the United States of Ame	prica, to the payment of which sum, well and truly to be made, we bind ourselves, our
ars, executors, administrators, successo	ors, and assigna jointly and severally, firmly by these presents.
HEREAS, the said Principal has made	or is about to make application to said Obligee for a License as or Permit to
ENERAL CONTRACTOR	
r a term beginning on09 <mark>/29/95</mark> s ]	Documare leading the pros/29/98 ty of
그리는 그 그래요 그 생활을 내려왔다.	그 가장 살아 먹는 사람들이 되었다. 그 그들 때문에 가장하는 사람들이 살아지고 있었다. 그는 바로 바로를 만들어 가장 그리는
W DEPEROPE IN	e Lake County Recorder! d License or Permit now or hereafter being granted issued or renewed, said Principa
LIVE TO EREPORE, IN CONSIDERATION OF SAID	d License or Permit now or hereafter being granted issued or renewed, said Principa of all ordinances, rules and regulations concerning said License or Permit, and shal
ive and keen harmless the Obliges from	all direct loss or damage which it may sustain or for which it may become liable or
count of the issuance of said license	or Permit to the Principal; compliance by the Principal with these obligations shall
ake this bond void; otherwise, to remain	in full force and effect.
	[전화 시설 - 20 ] 역시 [역 ] [연 ] [연 ] [연 ] (역 ) [연 ] [연
ROVIDER, HOWEVER, AND UPON THE FO	OLLOWING EXPRESS CONDITIONS:
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ortificate Prood by Suroty In no event	orce for the stated term, and may be continued in force by issuance of a Continuation t, however, shall the trability of the Surety be cumulative from year to year or from
erind to period por to exceed the penal	sum written in the first paragraph of this bond.
The Surety may at anytime terminate	e its liability by giving thirty (30) days written notice to the Obligee, and the Surety
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## STATE INSURANCE COMPANY INSURANCE COMPANY INSURANCE COMPANY)

HOME OFFICE - NORTHBROOK, ILLINOIS

KNOW ALL MEN BY THESE PRESENTS: That All state Insurance Company, a corporation organized and existing under the laws of the State of Illinois, and having its principal office at Alistate Plaza, Northbrook, County of Cook, State of Illinois, does hereby appoint.

#### LINDA M. BELLAMY, MARILYN S. WALSH, OR SHARON N. PICOT

its true and lawful agents and Attorneys-in-Fact, individually, to make, execute, sign, acknowledge, affix the Company Seal to, and deliver any and all surety bonds, consents, undertakings, and other writings obligatory in the nature of a bond, for and on behalf of said Company and as act and deed of said Company, with a limit not to This authority shall expire without notice at midnight of December 31, 1995, unless revoked sooner in writing.

This appointment is made under and by authority of the following provision of the By-Laws of the Company which provision is now in full force and effect and is the only applicable provision of said By-Laws.

#### **ARTICLE V. SECTION 1.**

All policies of insurance issued by this Company shall comply with the laws of the respective states, territories or jurisdictions in which the policies are issued. All bonds, undertakings, certificates of insurance, cover notes, recognizences, contracts of Indemnity, endorsements, stipulations, waivers, consents of sureties, reinsurance acceptances or agreements, surety and co-surety obligations and agreements, underwriting undertakings, and all other instruments pertaining to the insurance business of the Company, shall be validly executed when signed on behalf of the Company by (1) the Chairman of the Board (2) the President (3) any Vice President or Assistant Vice President, or (4) any other officer, employe, agent, or Attorney-In-Fact authorized in writing to sign by the Chairman of the Board, the President, or any Vice President All policies of insurance shall bear the signature of the President and of the Secretary, which signatures may be facts miles, and shall be countersigned by a duly licensed resident agent where so required by law or regulation. shall be of the same validity as that of an existing officer.

The affixing of the Company's Seal shall not be necessary to the valid execution agent, or Attorney-in-Fact authorized in writing so to do by the Secretary, any Assis rument but the Secretary, any Assistant Secretary, or any officer, employe, or any Vice President, may affix the Company's Seal thereto.

This Power of Attorney is signed and sealed by facility of the following Resolution voted by the Board of Directors of Alistate Insurance Company at a meeting duly called and held on the 13th day of December 1970 the Lake County Recorder!

BE IT RESOLVED, that the signatures of the President, the Secretary, any Vice President, or any Assistant Vice President, and the seal of the Company may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing Attorneys-In-Fact for the purpose of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such power of attorney or certificate so executed by and bearing such facsimile signature or signatures and facsimile seal shall be valid and binding upon the Company, and in particular, shall be valid and binding in the future with respect to any bond or undertaking or other writing obligatory in the nature thereof to which (t is attached for such

IN WITNESS WHEREOF, ALL STATE INSURANCE COMPANY has caused these presents to be signed by its Vice President and its Corporate Seal to be hereto affixed, on this day of November A.D. 1994 4 th



STATE OF ILLINOIS COUNTY OF COOK

Harold E. Shergold Martin J. Mulvihill certify that

personally known to be same person who is Vice President of the ALLSTATE INSURANCE COMPANY, a corporation of the State of Illinois, subscribed to the foregoing instrument, appeared before me on this 4 th day of November A 5 18 34, in person and acknowledged that he being thereunto duly authorized signed, sealed and delivered the said instrument as the free and voluntary act of said corporation and as his own free and voluntary act for uses and purposes therein set forth.

"OFFICIAL SEAL" MARTIN J. MULVIHILL Notary Public. State of Illinois My Commission Expires 8/3/96

My commission expires August 3, 1996

ALLSTATE INSURANCE COMPANY

#### CERTIFICATION

I, the undersigned Vice President of ALLSTATE INSURANCE COMPANY, DO HEREBY CERTIFY that the foregoing Power of Attorney is now infull force and effect.



Signed and sealed at Northbrook, Illinois this

October

Whole E Shangold
Vice President