

(1-80)

## American States Insurance Company INDIANAPOLIS, INDIANA LAKE COUNTY FILED FOR RECORD

COUNTY UNIFIED BOND

KNOW ALL MEN BY THESE PRESENTS: 98054041

98 JUL 15 PM 2: 37

That Parkview Development, Inc.	MORRIS W. CARTER
of 405 Keilman, Dyer, IN 46311	RECORDER as Principal
and AMERICAN STATES INSURANCE COMPANY duly auth	
Surety, are held and firmly bound unto All Cities, Town in the penal sum of FIVE THOUSAND AND NO/100 (\$5,000 payment of which, well and truly to be made, we bind ourselves jointly and severally, firmly by these presents.	0.00) DOLLARS, lawful money of the United States, for the
Signed, sealed and dated this 7th day o	( <u>July</u> 19 <u>98</u> .
	bond and guarantees the compliance with the ordinances ke: County County.
NOW, THEREFORE, THE CONDITION OF THIS OBLIC on and after the 7th day of 15 Julycument 1	GATION IS SUCH, That if the above bounden Principal shall state property 98 indemnify said Obligee against
all loss, costs, expenses or damage to it caused by said Prin ordinances, rules or regulations pertaining to such license o to be and remain in full force and effect.	cipal's non-compliance with or breach of any laws, statutes,
PROVIDED the term of the bond is continuous.	
AND, PROVIDED, the Surety may cancel this bond at to the Obligee.	t any time by giving thirty (30) days notice in writing mailed
PROVIDED FURTHER, regardless of the number of yof the number of premiums that shall be payable or paid, if in the aggregate, than the amount of this bond.	rears this bond shall continue or be continued in force and ne Surety shall not be liable hereunder for a larger amount,
PROVIDED FURTHER, regardless of the number of lice of claims that may be filed against this bond either under a si may exceed the penalty of this bond, the Surety shall not be the amount of this bond.	enses held by the Principal within the County and the number ngle license or more than a single license, the total of which liable hereunder for a larger amount, in the aggregate, than
PROVIDED FURTHER, that this bond shall be not consto perform the terms of a construction contract.	trued to provide indemnity as a result of the Principal's failure
IN WITNESS WHEREOF, the parties hereto have set	their hands and seals the day and year above written.
	Principal
가는 사용하다 보고 생각하다면 하고 있다는 것을 하는 것은 것이 되었다. 기본 사용하다 하다 사용 사용 사용 이 사용 등을 하는 것은 것이 되었다. 사용 기본	AMERICAN STATES INSURANCE COMPANY
	and L. Passar
	Atto rey-in-Fact

## **American States Insurance Company**

INDIANAPOLIS, INDIANA

constitute and appoint				ed, and does by these presents make,
LAWRENCE D. M	EYERS, BEVERLY	A. MESSER, JAN	ET L. PAPPAS OR	MARY JO NALEZNY
ofHammond		and State of	Ind	iana
its true and lawful Attorney(s)-	in-Fact, with full power and	authority hereby confer	ed in its name, place and	stead, to execute, acknowledge and
deliver any and all bonds, recog	gnizances, contracts of indem	nnity and other conditiona	or obligatory undertakings,	provided, however,
that the penal su	m of any one su	ch instrument	executed hereun	der shall not exceed
FIVE HUNDRED THOU	by as fully and to the same extend	( SOUU , UUU . UU )	oned by the President sealed	with the common seal of the Corporation
and duly attested by its Secretary and may be revoked pursuant to "The Chairman, the Pre- or Assistant Vice-Preside as the business of the i	r, hereby ratifying and confirmi and by authority granted by S sident or any Vice-President ( int) shall have power, by and w Corporation may require and	ng all that the said Attorne) ection 7.07 of the By-Lawa including any Executive Vith the concurrence with a to authorize any such or	r(s)-in-Fact may do in the prerr of the American States Insur ice-President, Senior Vice-Pr ny other officer of the Corpora arson to execute, on behalf	ance Company, which reads as follows: esident, Second Vice-President tion, to appoint Attorneys-in-fact of the Corporation, any bonds.
recognizances, stipulation	ons and undertakings, whethe	or by way of surety or oth	erwise''	•
				Second Vice-President, attested by its
Assistant Vice-President and its A.D. 19.98	corporate sear to the hereto	0-1-10-0-10-1	day of Man	
A.D. 18_20		AMERIC	AN STATES INSURANCE	COMPANY
ATTEST: Macili	NOT	OFFIC!	Paralle 4.	71.
Assista	ant Vice-PresidentOCUM	ent is the p	operty Second V	ce-President
	the Lake	County Red	order!	Aries INSO
STATE OF INDIANA	3			િ ફિલ્ફો
COUNTY OF MARION				NO AND
On this 19th	day of	March	. A.D., 19	98 , before me personally came
				, bololo me personany came
		F. Heim		, to me known, who
American States Insurance Co	ompany: that he knows the	seal of said Corporation	that the seal affixed to the	at he is a Second Vice-President of e said instrument is such corporate thereto under like authority. And said
Joseph F. Heim Assistant Vice-President of sa	further said that	he is acquainted with_	Mark A. Lawre	nce and knows him to be the
Assistant Vice-President of sa	id Corporation; and that he	executed the above in	strument.	
		STRUER'S OFF	Youlnow!	Granla.
CER ARAGRAT WED MOUNT	rrun, notary publ Ità, cyase of india	NA AV	Notar	y Public
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A. E.P. E.E. 10/2/20	00		ALRY PO
STATE OF INDIANA ) SS				(°(Sea1)
COUNTY OF MARION	,	ADIAN AUTIE		
I, Mark A. Lawre he above and foregoing is a tr s still in force and effect.	ence , the Assistant V ue and correct copy of a Po	ice-President of AMERI wer of Attorney, execute	CAN STATES INSURANCE	E COMPANY, do hereby certify that TES INSURANCE COMPANY, which
NSURANCE COMPANY which	ch reads as follows:			he By-Laws of AMERICAN STATES he Corporation by the Chairman.
the president or any vice-proof or Assistant Vice-President by an authorized representation upon the Corporat	resident (including any Exec ) and the secretary, assistan tative of the Corporation, n	utive Vice-President, Se it secretary, or other offic nay be facsimilies. Such t that any such officer s	nior Vice-President, Vice-P er, whose signatures, if the signatures and facsimiles hall have ceased to be su	resident, Second Vice-President, instrument is duly countersigned thereof shall be authorized and ch officer at the time such policy
In witness whereof, I hav	e hereunto set my hand a	nd affixed the seal of s	aid Corporation, this71	h day of July
A.D., 19 <u>98</u> .				LES INSUS
			. 00	
			Tudl Or	[z{ <b>36</b> 4.8]

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENT PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — PRESENT IN ITS ENTIRETY. IF YOU HAVE ANY QUESTIONS REGARDING THE VALIDITY OF THIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIS, IN 46206-1636.

Assistant Vice-President