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# Western Surety Company

2000 027939

## 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, Agent to Sell Hunting and Fishing Licenses or Utility Guarantee Bond.

KNOW ALL MEN BY THESE PRESENTS:

BOND No. L & P. 4295296

That we, SERVICEMASTER OF PORTER COUNTY  
of the CITY of VALPARAISO, 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  
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 DOLLARS (\$5,000.00),  
(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 CARPET & FURNITURE CLEANING & FIRE & WATER RESTORATION by the Obligee.

NOW WHEREFORE, 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 9th day of AUGUST, 1999, and ending on the 9th day of AUGUST, 2000, 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 expiration of thirty (30) 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 9th day of AUGUST, 1999.

Thomas J. Martz  
Principal

Countersigned

WESTERN SURETY COMPANY

By Marti Masterson  
Resident Agent

By Stephen T. Pate  
President

### ACKNOWLEDGMENT OF SURETY (Corporate Officer)

STATE OF SOUTH DAKOTA }  
County of Minnehaha } ss

On this \_\_\_\_\_ day of \_\_\_\_\_, before me, the undersigned officer, personally appeared Stephen T. Pate, 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.

J. RHONE  
NOTARY PUBLIC  
SOUTH DAKOTA  
My Commission Expires 6-12-2004

J. Rhone  
Notary Public, South Dakota  
Western Surety Company • 101 S. Phillips Ave.  
Sioux Falls, SD 57104 • 1-605-336-0850

STATE OF INDIANA

3974

ACKNOWLEDGMENT OF PRINCIPAL  
(Individual or Partners)

STATE OF Indiana }  
County of Lake } ss

On this 25 day of April, 2000, before me personally appeared  
Thomas H. Marty

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

02-23

**Document is NOT OFFICIAL**  
Sherry N. Kimble  
Sherry A. Kimble Notary Public

This Document is the property of  
ACKNOWLEDGMENT OF PRINCIPAL  
(Corporate Officer)  
the Lake County Recorder!

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

On this \_\_\_\_\_ day of \_\_\_\_\_, 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

Notary Public



Western Surety Company

License or Permit No. \_\_\_\_\_

LICENSE AND PERMIT  
BOND

AS

of \_\_\_\_\_

State of \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Filed \_\_\_\_\_

Approved this \_\_\_\_\_

day of \_\_\_\_\_