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# Western Surety Company

2000 0300

## 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 Bonds

KNOW ALL MEN BY THESE PRESENTS:

BOND No. L & P. 4278805

That we, Care Sheet Metal, Inc.  
of the Village of Willow Springs, State of Illinois, as Principal,  
and WESTERN SURETY COMPANY, a corporation duly licensed to do business in the State  
of Illinois, as Surety, are held and firmly bound unto the

all cities, Towns and Municipalities in 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 and no/100 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 as a roofing contractor

by the Obligee.

NOW THEREFORE, 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 10th day of  
May, 2000, and ending on the 9th day  
of May, 2001, 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 expira-  
tion of thirty-five (35) 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 10th day of May, 2000.

Care Sheet Metal, Inc.  
Principal

by Michael Zuccaro  
Principal

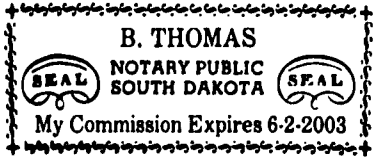
WESTERN SURETY COMPANY

Countersigned  
By [Signature]  
Resident Agent

By Stephen T. Pate  
President

### ACKNOWLEDGMENT OF SURETY

STATE OF SOUTH DAKOTA } ss (Corporate Officer)  
County of Minnehaha }  
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.



[Signature]  
Notary Public, South Dakota  
Western Surety Company  
1-605-336-0850

12:00 PM

CK# 15906

ACKNOWLEDGMENT OF PRINCIPAL  
(Individual or Partners)

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

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally appeared

\_\_\_\_\_ 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 \_\_\_\_\_

Document is

NOT OFFICIAL!

ACKNOWLEDGMENT OF PRINCIPAL  
(Corporate Officer)  
Property of  
the Lake County Recorder!

2000  
038533  
Notary Public

STATE OF Illinois }  
County of Cook } ss

On this 23 day of May, 2000, before me,

personally appeared Michael Zuccaro, who acknowledged himself to be the President of Care Sheet Metal & Roofing Inc., a corporation, and that he as such officer being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by himself as such officer.

My commission expires \_\_\_\_\_



*Patricia A. Schwartz*  
Notary Public

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 \_\_\_\_\_