

Bond No. <u>0735140</u>

## **LICENSE AND PERMIT BOND**

(Valid in the states of Illinois, Indiana, Iowa, Michigan, Minnesota and Wisconsin only)
For County, City, Town or Village Only – Not valid for bonds required by the State.
Not valid for Contract, Performance, Maintenance, Subdivision, Supply or Utility Guarantee Bond.

Principal: (Full name and address)	Obligee: (Principal's customer)	
County Cement Construction, Inc.	Lake County, Indiana and any cities therein	
20834 S. Torrence Ave.	2293 N. Main Street	
Lynwood, IL 60411	Crown Point, IN 46307	<b>№</b>
Effective Date: 12/31/2005	Expiration Date: 12/31/2	20 <del>66</del>
(Valid for one year)		0
PENAL AMOUNT OF BOND (Not valid for more than \$25,000):	440.000.00	<u></u>
Ten thousand dollars and 00/100		lawful money of the
United States, to be paid to the said obligee, for which payment	well and truly to be made we bind ourselv	res and our legal
representative, jointly and severally.		വ
The condition of this obligation is such, that whereas, the princip	nal has been ligared by the Obligee for:	<del></del>
Cement Contractor	pairias been licensed by the Obligee lor.	ω
Centent Contractor		<u> </u>
Docut	nent is	
NOW, THEREFORE, if said Principal shall faithfully perform all	the duties and comply with the laws and	ordinances, (including
all amendments) pertaining to the license or permit, then this ob	ligation to be void; otherwise to remain in	full force for not more
than 12 consecutive months, unless renewed by continuation c		<b>85</b>
	is the property of \overline{\overli	
This bond may be terminated at any time by the Surety upon		
thirty-five (35) days from the mailing of notice or as soon the		
bond shall terminate and the Surety shall be relieved from any I	iability for any subsequent acts or mission	ons of the Principal.
Discipate company shall now and translation the Obligat	form all basses or domestic white	and the second s
Principal's company shall save and keep harmless the Obligee		
may become liable on account of the issuance of said license	and permit. The maximum liability snal	
penalty.		궁.
Signed with our hands and sealed with our seals this, the	14 day of November , 20	05.
		TAL INSUA
WEST WEST	BEND MUTUAL INSURANCE COMPAN	NY SE
Man 5	al aubum	CORPORATE
3	Control of Con-	SEAL #
(Principal)	Anthony J. Warren, Chief Executive Office	cer Conon Co
On the 1st day of March, 2002, before me personally came An	thony I Warren to me known who being	by me duly sworn
did depose and say: that he resides in the County of Washing	ton, State of Wisconsin; that he is the C	Chief Executive Officer
of WEST BEND MUTUAL INSURANCE COMPANY the corpor	ration described in and which executed the	ne above instrument;
that he knows the seal of the said corporation, that the seal aff	ixed to said instrument is such corporate	seal, that it was so
affixed by order of the Board of Directors of said corporation an	id that he signed his name thereto by like	order. F. Du
STATE OF WISCONSIN	IN F DAMAGO	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
County of Washington	John Duwell (Notary Pu	
County of Washington	My Commission is permar	
	wy Commission is permar	TOP WISON IN
MICHIGAN ONLY: This policy is exempt from the filing require	ements of Section 2236 of the Incurance	Codo of 1956, 1956, AV
PA 218 and MCL 500.2236.	amenta of Section 2230 of the Insufance (	Code of 1900' 1900 (197)
NB 0054 10 03		Page 1 of 1
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## DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE FOR SURETY BONDS

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, effective November 26, 2002, that you now have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of the Act. The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property; or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals acting on behalf of any foreign person or foreign interest, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. If a surety bond is issued, coverage under it may be affected as follows:

You should know that coverage provided by the surety bond being offered, purchased or renewed for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays 90% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

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The portion of this premium quotation or invoice attributable to coverage for losses caused by certified acts of terrorism is \$0.00. We are not offering you the option to reject the coverage required to be made available to you under the Act, since there is no charge for this specific coverage under the surety bond being offered, purchased or renewed.



NB 0118 05 03

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## **RIDER TO BOND**

Effective December 31 , 20 05 , this rider is hereby attached to and made a part of Bond No. NLD0735140
issued on behalf of County Cement Construction, Inc.
as Principal, and in favor of Lake County, Indiana and any cities therein
as Obligee, for: Obligee should read: the Board of Commissioners of the County of Lake, State of Indiana, and
any cities and towns in Lake County, Indiana.
All other terms and conditions shall remain the same.
Document is
WEST BEND MUTUAL INSURANCE COMPANY
WEST BEND MOTUAL INSURANCE COMPAN OFFICIAL!
This Decrement is the grangety of
This Document is the property of Attorney-In-Fact the Lake County Recorder!
Name Typed: David M. Thomas the Lake County Recorder!
MICHIGAN ONLY: This policy is exempt from the filing requirements of Section 2236 of the Insurance
Code of 1956, 1956 PA 218 and MCL 500.2236.

NB 0025 04 05

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