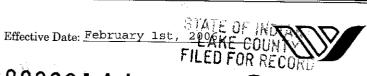
2006 00892NA/



VESTERN SURETY COMPANY • ONE OF AMERICA'S OLDEST

006

00892 Western Surety Company

MICHAELCENSOWN PERMIT BOND RECORDER

Bond No. 14795023

			PRESENTS,		(Company Name	۵)
Covenant 1 47356	Building Co	orporatio	n, 5634 N	. County Road 400		IN 👡
***************************************		(0	wner's Name a	nd Full Address)		—≩_, Prin ci pal,
and WESTER	RN SURETY C	OMPANY,	with its princ	ipal office at Sioux Fall	ls, South Dakota, as.	Surety, are held and
urimy bound i	unto The Board	t of Commiss	sioners of the	County of Lake, State of	f Indiana and anvicit	ies and tower in talk
County, India	ına, heremafter	· called Obli	gee, in the pe	enal sum of Five Thousa	ind Dollars (\$5,000 🕅	M for the navment of
willeir well at assions iointh	nd truly to be y and severally	made we d	lo hereby bin	d ourselves, our heirs,	executors, administr	ators, successors and
accigins, joilid	y and severally	, minity by th	nese presents.	•		
Signed an	nd sealed this	lst	day of	February	2006	
WILLIAM	0.0					€ =
WHEREA	AS, the said Obl	igee has gra	inted or is abo	ut to grant to the said Pr	rincipal a license or pe	ermit to engage in the
ousiness of	General (ontracto	DOC	cument 18		
		N	OT	(Type of Business)	L!	
		This	Docum	ent is the proj	perty of	
-						
NOW, TH	EREFORE, if t	he said Prir	ncipal shall in	County Recorded demnify the Obligee aga	ainst any loss direct	ly arising by reason
f the failure	to comply wit	th the laws	, ordinances,	resolutions, rules and	regulations governing	ng the business of
General Co						
			(T)	ype of Business)		
n said Lake C	ounty, India <mark>na</mark> ,	then this ol	(Ty bligation shall	ype of Business) I be void, otherwise to be	and remain in full for	rce and effect.
			bligation shall	be void, otherwise to be		
PROVIDE	D, HOWEVER	, that the St	bligation shall arety shall ha	be void, otherwise to be		
PROVIDE atice upon the	D, HOWEV <mark>ER</mark> e Obligee ten (1	, that the St 0) days in a	bligation shall arety shall hadvance of its i	be void, otherwise to be ve the right to terminate ntention to do so.	e its liability hereund	der by serving written
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Prescribed by the State Board of Accounts (2005)

County form 170

Declaration

Document is

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a) nent is the property of

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury:

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are

Signature of Declaration

Printed Name of D