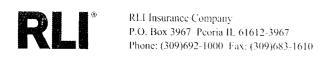


RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

LICENSE AND PERMIT BOND

R1331806-10,30

Bond No. <u>LSM0111675</u> KNOW ALL MEN BY THESE PRESENTS: That we, Mike D. Martino DBA Hammer Down Construction 14 Sierra Madre Hebron, IN 46341 as Principal, and the _ RLI Insurance Company , a corporation duly licensed to do business in the state <u>Indiana</u> _, as Surety, are held and firmly bound unto the Board of Commissioners of the County of Lake, State of Indiana, and any cities and towns in Lake County, Five Thousand and 00/100 S 5,000.00) DOLLARS, lawful money of the United States, to be paid to the said Obligee, for which parent well and the be made, we bind ourselves and our legal representatives, jointly and severally by these presents. THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, That whereas, the said Principal has been limited as a(n) by the **Galig**ee. Carpenter/ NOW, THEREFORE, if the said Principal shall faithfully perform the duties and in all things comply with the laws and or including all Amendments thereto, pertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect for a period commencing on the 7th day of April 2009, and ending on the 7th day of ______, <u>2010</u> This Document is the property of This bond may be terminated at any time by the Surety upon sending written notice to the clerk of the Political Subdivision with whom this bond is filed and to the Principal, addressed to them at their first known address, and at the expiration of thirty (30) days from the mailing of said notice, or as soon thereafter as permitted by applicable law, whichever is later, this bond shall terminate and the Surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date. Dated this ___7th __ day of ___ April Principal (Additional Partner or Partners) Countersigned **RLI Insurance Company** Ment Matin Roy C. Dig



POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0111675</u>

Know All Men by These Presents:

That the	RLI Insu	rance Company	, a co	poration organiz	ed and existing	under the la	ws of the State of
		nd authorized and lic					
constitute and ap	ppoint:	Roy C. Die		n the City of	P	eoria	, State of
Illinois	s, as	Vice President	, with ful	power and auth	nority hereby co	onferred upor	n him/her to sign,
execute, acknow	ledge and deliver	for and on its behalf	as Surety, in gen	eral, any and all	bonds, undertal	kings, and re	cognizances in an
amount not to	exceed	One Million	and 00/100	Doll	ars (<u>\$1,00</u>	00.000,00) for any single
obligation, and s	pecifically for the	following described	bond.				
Principal:	Mike D. Marti	no DBA Hammer D	own Construction				
Obligee:	Board of Com	missioners of the Co	unty of Lake, Sta lonly when a County, City	te of Indiana, a	nd any cities a	nd towns in	Lake County, IN
Type Bond:	Carpenter	(vanc	only when a county, Chy	, Town of Village is ha	med as Congee)		
Bond Amount:	\$ 5,000.00						-
Effective Date:	April 7, 2009						
The	RLI Insuran	ce Company	OCII fiiriber	certifies that the	e following is	a true and	exact copy of a
		of Directors of					
pr			OFFI	CIAL			
undertakings, corporate seal	Powers of Atto may be printed l	the Company. The rney or other oblig by facsimile."	gations of the co	rporation. The	e signature of	any such	officer and the
itsVice							
its Vice	President	_ with its corporate s	eal affixed this	/th day of _	<u>Aprıl</u>	,2009	 '
ATTEST:			RANCE CO	RLI Insuran	ice Company		
Cura	mod. Lai		SEAL				
Cynthia S. IJohm		Assistant Secretary	SEAL	Roy C. Die			Vice President
	day ofApril						
andC		, who being	by me duly sworn	, acknowledged	that they signed	I the above P	ower of Attorney
as		<u>t </u>	and	Assistant Secre	tary	, respect	rively, of the said
said corporation.	RLI Insurance C	Company	, and acknown	wledged said ins	strument to be	the voluntary	act and deed of
said corporation.							
			1 2 2 2 4	DEECIAL CEAL "	\ }		
a	Exeline II	1. Dockler	NOTARY F JACO	OFFICIAL SEAL" QUELINE M. BOCKLER			
Jacqueline M. Bock	kIler	Notary Pul	olic illinois coma	IISSION EXPIRES 03/01/10			



RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

Acknowledgment of Surety

STATE OF	Illinois			
COUNTY OF	Peoria	} ss.		
On this <u>7th</u>	day ofApril	,	me, a Notary Public in and	l for said County, personally
appeared	Roy C. Die	, personally knowr	n to me, who being by me c	luly sworn did say that
he/she is the aforesaid	Vice President	of the	RLI Insurance	Company
of <u>Peoria</u>	, Hling	ois , a cor	poration duly organized an	d existing under the laws of
the State ofIllino	ois , that the	seal affixed to the for	egoing instrument is the co	orporate seal of said
corporation, that the said ins	trument was signed, sea	aled and executed in b	pehalf of said corporation b	y authority of its Board of
Directors, and further ackno				
corporation.	C	TC		
IN WITNESS WI	HEREOF, I have hereur	nto subscribed my nar	me and affixed by official s	eal the day and year last
above written.				
My Commission Expires:	NOTARY PUBLIC FIACO	OFFICIAL SEAL " QUELINE M. BOCKLER HISSIONEXPIRES 03/01/10		
3/1/2010		SEAL WOIANA	Jacqueline M. Bockler	M. Doeller Notary Public