

Bond Number <u>0809572</u>

## **License and Permit Bond**

(Valid in the states of Illinois, Indiana, Iowa, Michigan, Minnesota, Ohio 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)	
K"s CONSTRUCTION SPECIALISTS INC	Bd of Comm of Co of Lake-St IN,any cities/towns in Lake Cty	
1202 FORMUILA DR SUITE A	2293 N Main St	
VALPARAISO, IN 46383	Crown Point, IN 46307	
Effective Date: 4/29/2009	Expiration Date: 4/29/2010	
(Valid up to 3 years)		
PENAL AMOUNT OF BOND (Not valid for more than \$25,	000):	
Five thousand dollars and 00/100	Doll <b>ass</b> (\$ <u>5,0</u>	)00.00),
lawful money of the United States, to be paid to the said o	bligee, for which payment well and truly to be made we b	ind
ourselves and our legal representative, jointly and several	y.	
The condition of this obligation is such, that whereas, the	orincinal has been licensed by the Obligee for:	
CARPENTRY & ROOFING CONTRACTOR	officipal has been licensed by the obligee for.	
CAN ENTRY & ROOF ING GONTRACTOR	N	
	9	
NOW, THEREFORE, if said Principal shall faithfully perform		
all amendments) pertaining to the license or permit, then t	his obligation to be void; otherwise to remain in full force	for not more
than 36 consecutive months, unless renewed by continual	ion certificate.	
This bond may be terminated at any time by the Surety L	upon sending notice in writing to the Obligee and at the	expiration of
thirty-five (35) days from the mailing of notice or as soon t		
shall terminate and the Surety shall be relieved from any li		
		i sa
Principal's company shall save and keep harmless the O	The same of the sa	
may become liable on accou <mark>nt of the issuance of said lice</mark>	cense and permit. The maximum liability shall not exce	ed the bond
penalty.	- [C	ໍ່ເກ ວ່າກ
Signed with our hands and sealed with our seals this, the	29 day of April (2), 20, 09, 3	Same Mary p
	Med H ma	iai Ne
	VEST BEND MUTUAL INSURANCE COMPANY	The state of
	Z = 00	PORATE 8
Surut Xhul	Win of line	SEAL # 5
(Principal)	Kevin A. Steiner, Chief Executive Officer	KOTON CO. S.
		***************************************
On the 1st day of March, 2009 before me personally ca	ame Kevin A. Steiner to me known, who being by me du	ly sworn did
depose and say: that he resides in the County of Wash	nington, State of Wisconsin; that he is the Chief Executi	ive Officer of
	corporation described in and which executed the above	
	seal affixed to said instrument is such corporate seal, the	
affixed by order of the Board of Directors of Said Corpora	tion and that he signed his name thereto by like order	Y. DUN
STATE OF WISCONSIN	-INLANE CALLED 19	NOTATIVE SELECTION
County of Washington	John Dawell (Notary Public)	NOTARY PUBLIC
County of washington		2014
	My Commission is permanent.	OF WISCY
MICHIGAN ONLY: This policy is exempt from the filir	ng requirements of Section 2236 of the Insurance Code	of 1956
1956 PA 218 and MCL 500.2236.		(1 N
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NB 0054 03 09	Pa	ge 1 of 1

8401 Greenway Blvd. Suite 1100 | Middleton, WI 53562 | Phone: (608) 410-3410 | Fax: (877) 674-2663 | www.wbmi.com