License -Bond

## Ohio Farmers Insurance Co. FILED FOR RECORD Westfield Group SM SM

Westfield Group SM SM Westfield Center, Ohio 44251-5001

2010 OCT -6 PM 2: 30

MICHE	Bond No. <u>0017275</u>
KNOW ALL MEN BY THESE PRESENTS:	RECORDER Bond No. 0017273
THAT WE, Scott Roan DBA Installations	s Unlimited
,as Principal, and C	OHIO FARMERS INSURANCE COMPANY, an Ohio Corporation with
principal office at Westfield Center, Ohio, as Surety	y, are held and firmly bound unto Board of Commissioners of Lake County,
Indiana, and all cities and towns in Lake County, Indiana	a, as Obligee, in the sum
of _Five Thousand	00/100 DOLLARS (\$ 5,000.00 ),
for the payment of which sum, well and truly to be r	made, we bind ourselves, our personal representatives, successors and
assigns, jointly and severally, firmly by these prese	ents.
DATED this <u>5th</u> day of <u>Octo</u>	ober . 2010 .
The Condition of this obligation is such, tha	at whereas Principal is desirous of obtaining a license from <u>Board of</u>
Commissioners of Lake County, Indiana, and all cities are	nd towns in Lake County, Indiana to carry on business
as Listed General Contractor	
in Lake County, Indiana	
	d commencing on the <u>5th</u> day of <u>October</u> ,
2010 , and ending on the 31st	day of <u>December</u> , <u>2010</u> .
Ordinances, Rules and Regulations, and any Amer shall become void and of no effect, otherwise to be	uring the aforesaid term, faithfully observe and honestly comply with suc endments thereto, as require the execution of this bond, then this obligation e and remain in full force and virtue.  The area of the sure of the su
hereon.	
Westfield Insurance 1-800-243-0210 P.O. Box 5001, Westfield Center, OH 44251	Scott Roan DBA Installations Unlimited  Principal By South Bar  OHIO FARMERS INSURANCE COMPANY
Burnette-Dellinger Agency, Inc. P.O. Box 455, Elwood, IN 46036	Burnette-Dellinger Agency, Inc. 130139  Attorney-in-Fact  765-552-7323
	Agency and/or Agency Code AMOUNT \$  CASH CHARGE  CHECK #  OVERAGE  COPY  NON - COM
BD5091 OF (03-01)	CLERK RM