

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD Bond 6752517

2011 MAR 14 AM 8: 42

LICENSE OR PERMIT BOND

MICHELLE E FAJMAN RECORDER

| KNOW ALL BY THESE PRESENTS, That we, HOUSE OF DO | OORS, INC. |
|---|---|
| as Principal, of 9038 Ogden Avenue | · · · · · · · · · · · · · · · · · · · |
| | (Street and Number) the AMERICAN STATES INSURANCE COMPANY |
| (City) (State) , a INDIANA | corporation, as Surety, are held and firmly |
| bound unto Board of Commissioners of the County of Lake, S | tate of Indiana, and any Cities and Towns in Lake |
| County, Indiana | , as Obligee, in the sum of |
| Five Thousand Dollars And Zero Cents | |
| | for which sum, well and truly to be paid, we bind ourselves, |
| our heirs, executors, administrators, successors and assigns, jointly | |
| Sealed with our seals, and dated this 11th | day of March , 2011 . |
| THE CONDITION OF THIS OBLIGATION IS SUCH, That WHI | EREAS, the Principal has been or is about to be granted a |
| license or permit to do business as Overhead Door and Doc Inst | tallation Contractor |
| | |
| by the Obligee. | ent is |
| NOW, THEREFORE, if the Principal well and truly comply well and tr | |
| OR executed by the Surety Until canceled as herein provided. This bond may be canceled by the Surety by the sending of n thirty days thereafter, liability hereunder shall terminate as to surety. | r until the date of expiration of any Continuation Certificate otice in writing to the Obligee, stating when, not less than absequent acts or omissions of the Principal. |
| ** I affirm, under the penalties for perjury, that I have taken redocument, unless required by law. ** | easonable care to redact each social security number in this |
| AMOUNT \$ CASH _ CHARGE _ CHECK # G 2 47 OVERAGE _ COPY _ NON-COM _ CLERK _ COPY _ ROM _ CLERK _ C | Principal Philip J. Salb, President AMERICAN STATES INSURANCE COMPANY By The O O O O |