## Bond Safeguard INSURANCE COMPANY

900 S. Frontage Road, Suite 250, Woodridge, IL 60517 (630) 495-9380

BOND NO. 15-312140

## **INDIANA**

LICENSE AND/OR PERMIT BOND
(ONLY VALID IF FILLED IN FOR LESS THAN \$25,001.00
AND OBLIGEE IS AN INDIANA COUNTY, CITY, TOWN OR VILLAGE.)

KNOW ALL MEN BY THESE PRE						
That we Better Built Lumber & Supply, Inc.						
(Principal's Name)  17350 S. Cicero Ave. Country Club Hills, IL 60478						
(Principal's Address)						
as Principal, and BOND SAFEGI			surance company	duly licensed in the		
as Principal, and BOND SAFEGUARD INSURANCE COMPANY, an insurance company duly licensed in the The board of commissioners of Lake, State of State of Indiana, as Surety, are held and firmly bound unto Indiana, and any cities and towns in Lake Count						
State of Indiana, Obligee, in the ag to the payment of which sum the executors, successors and assigns	e said Principal and Sure	ty bind then	nselves and their	s (\$ <u>5,00 00 منتخت</u> heirs, ad <del>m</del> inistrators,		
In consideration thereof, the Prin	ncipal is granted a license	e and/or pe	rmit by the Oblige	ee to en <del>ga</del> ge in the		
business of General Contr	ractor	_		99		
for the period beginning on the	23rd	day of	March	2015		
and ending on the	23rd	day_of	March	<u>, v 2016</u> .		
THEREFORE: the condition of this bond is that, if said Principal shall comply with all of the conditions of the ordinances and regulations of the Obligee pertaining to said license and/or permit, then this obligation shall be null and void; otherwise to remain in full force and effect subject to the following conditions:  1. This obligation may be extended from year to year at the option of the Surety, by continuation certificate executed by the Surety;  2. This obligation may be cancelled by the Surety upon giving thirty (30) days written notice to the Obligeer However, this obligation shall remain in full force and effect as to the acts or omissions of the above the notice of the Obligeer Principal prior to the cancellation of the bond.						
Dated this 23rd	day of	March		S 62015, g		
Countersigned:		Better Bu	JARD INSURANCE	Officer  COMPANY  Self		
STATE OF ILLINOIS COUNTY OF DUPAGE SS	ACKNOWLEDGEMENT (Corporate Of		Y SOL	OTH COMPANY AND THE PANY AND TH		
On this <u>21st</u> day of <u>Septem</u> David E. Campbell, who acknowle COMPANY, a corporation, and that ment for the purpose therein con IN WITNESS WHEREOF, I have here	edged himself to be the afo at he, as such officer, being ntained, by signing the na	oresaid office g authorized ame of the o	ndersigned officer er of BOND SAFE( to do so, executed	personally appeared GUARD INSURANCE I the foregoing instru-		
#14-00 MOFFICIA MAUREE Notary Public, S My Commission	N K. AYE State of Illinois		Maur K (  Notary Public, State			

CASh

## **ACKNOWLEDGMENT OF PRINCIPAL**

(INDIVIDUAL OR PARTNERS)

· ·		•	
STATE OF Illinois COUNTY OF Cook On this Asth day of Andrew R. George	) ss 	, <i>2015</i> , before me perso	onally appeared
known to me to be the individual de edged to me thathe executed the		executed the foregoing instrume	ent and acknowl-
My commission expires:		0 /	
11-8	, <u>2015</u> .	hand a Hear	Notary Public
NO	Document T OFFIC VLEDGMENT Q ACCORPORATE OFFIC	FORINCIPAL	E Title
1	) SS		
On this 35th day of	March of	, 20/5, before mapers , who acknowledge and the foregoing instrument	ed himself to be
therein contained by signing the name of t		hoolf on auch officer	N
My commission expires: $11-8$	, 2015.	Trancy Weorg	<i>QÌ</i> <b>∼Not</b> ary Public
		Notary Public. State of IIII My Com	inois {

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