

CHECK# OVERAGE COPY

NON-CONF. DEPUTY

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

LICENSE AND PERMIT BOND

Bond No. <u>LSM0731310</u> KNOW ALL MEN BY THESE PRESENTS: That we, Imperial Design Home Improvement 10119 S Avenue L Chicago, IL 60617 RLI Insurance Company as Principal, and the _, a corporation duly licensed to do business in the state Indiana , as Surety, are Held and firmly bound unto the Board of Commissioners of the County of Lake State of Indiana, and any office and towns in Lake County. In contact the County of Lake State of Indiana, and any office and towns in Lake County. In contact the County of Lake State of Indiana, and any office and towns in Lake County. In contact the County of Lake State of Indiana, and any office and towns in Lake County. In contact the County of Lake State of Indiana, and any office and towns in Lake County. In contact the County of Lake State of Indiana, and any office and towns in Lake County. Obligee, in the penal sum of (_\$ 5,000.00_) DOLLARS, lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally by these presents. THE CONDITION OF THE ABOVE BLICATION IS SUCPLY THAT WHERE S. PHE SAIP PAIR PAIR been licensed as a(n) Licensing and Perhit Bord County Recorder! by the Obligee? NOW, THEREFORE, if the said Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, 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 4th day of May, 2015, and ending on the 4th day of May , 2016 . 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 4th day of May Principal Principal (Additional Partner or Partners) (Individual, Partner or Corporate Officer) Melia Casillas **RLI Insurance Company**

Roy C. Die

Vice President

R1331510-10,30



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

POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0731310</u>

Know All Men by These Presents:

That the	RLI Insurance Company , a corporation organized and existing under the laws of the State of
	Illinois , and authorized and licensed to do business in all states and the District of Columbia does hereby make,
constitute	e and appoint: Roy C. Die in the City of, State of
	Illinois , as <u>Vice President</u> , with full power and authority hereby conferred upon him/her to sign,
execute,	acknowledge and deliver for and on its behalf as Surety, in general, any and all bonds, undertakings, and recognizances in an
amount :	not to exceed One Million and 00/100 Dollars (\$1,000,000.00) for any single
obligation	n, and specifically for the following described bond.
Principa	l: Imperial Design Home Improvement
Obligee:	(Valid only when a County, City, Town or Village is named as Obligee)
Туре Во	NOI OFFICIAL:
Bond Ar	nount: \$ 5,000.00 This Document is the property of
Effective	Date: May 4, 2015 the Lake County Recorder!
The	RLI Insurance Company further certifies that the following is a true and exact copy of a
	on adopted by the Board of Directors of RLI Insurance Company, and now in force to-wit:
Secreta underta underta	other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant ry, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or akings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, akings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the ate seal may be printed by facsimile."
IN WIT	VESS WHEREOF, the RLI Insurance Company has caused these presents to be executed by
its	Vice President with its corporate seal affixed this 4th day of May . 2015
ATTEST	RLI Insurance Company
(India SEAL I
Cynthia S	Dohm Assistant Secretary Roy C. Die Vice President
On this _	4th day of May , 2015 before me, a Notary Public, personally appeared Roy C. Die
	Cynthia S. Dohm , who being by me duly sworn, acknowledged that they signed the above Power of Attorney
as	<u>Vice President</u> and <u>Assistant Secretary</u> , respectively, of the said <u>RLI Insurance Company</u> , and acknowledged said instrument to be the voluntary act and deed of
said corp	
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	"OFFICIAL SEAL"
Jacquelin	M. Bockler Notary Public STATE OF MANUSCOMMISSION EXPIRES 01/14/18



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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 4tl	n day of May	2015 , before me, a Notary Public in and	for said County, personally	
On this	Doc	ument is	101 said County, personally	
appeared	Roy C. Die , pe	sonally known to me, who being by me d	uly sworn did say that	
he/she is the aforesaid _	NOTO	of the RLI Insurance of the RLI Insurance of the property of		
of <u>Peoria</u>	the Walke (County of moration duly of ganized an	d existing under the laws of	
the State of	Ilinois, that the seal af	fixed to the foregoing instrument is the co	rporate seal of said	
corporation, that the said	d instrument was signed, sealed an	d executed in behalf of said corporation b	y authority of its Board of	
Directors, and further acknowledge that the said instrument and the execution thereof to be a voluntary act and deed of said				
corporation.	Anovicing that the said histration	a and the execution alerees to be a volume	ay act and deed of said	
	, si	WDER'S ON		
IN WITNESS	WHEREOF, I have hereunto sub	scribed my name and affixed by official s	eal the day and year last	
above written.	The state of the s			
My Commission Expire	S: "OFFICIAL PUBLISHED STATE OF STATE O	M. BOCKLER	$\overline{}$	
1/14/2018		and the second	M. Foeller	
		Jacqueline M. Bockler	Notary Public	