



RLI Insurance Company

LICENSE AND PERMIT BOND

RLI	Phone: (309)692-1000 Fax: (309)683-1610			ಌ
		Bond N	No. <u>LSM0797904</u>	2015
KNOW ALL MEN	BY THESE PRESENTS:			067
/1	Lawn Services LLC			යා ⊕ .
1748 Autı				<u></u>
Dyer, IN				
as Principal, and the	RLI Insurance Com	pany , a corporati	on duly licensed to do bu	siness in the state
of <u>Indi</u>	ana , as Surety, are held ar	d firmly bound unto the	· · · · · · · · · · · · · · · · · · ·	<u>-</u>
Board of Co	mmissioners of the County of Lake St	te of Indiana, and any cities and to	wns in Lake County-IN	
in the penal sum of		Five Thousand and 00/100		<u>en =</u>
	DOLLARS, lawful money of the Unite			well and truly to be
made, we bind ourse	elves and our legal representatives, joint	ly and severally by these presents.		ယ ာက်ဝ
		ent is the property		
THE CONDITION	OF THE ABOVE OBLIGATION IS SI	County Recorder	ipal has been licensed as	a(n)
	Lawn Care Contractor		by the Obligeen	
NOW THEREFOR	E, if the said Principal shall faithfully p	erform the duties and in all things	comply with the laws and	l ordinances
	Iments thereto, pertaining to the license			
full force and effect	for a period commencing on the 3	oth day of September .	2015 and ending on t	he 30th
day of <u>Septemb</u>				
	, , , , , , , , , , , , , , , , , , , ,			
This bond may be te	erminated at any time by the Surety upo	n sending written notice to the cler	k of the Political Subdivi	sion with whom
this bond is filed and	d to the Principal, addressed to them at	heir first known address, and at the	e expiration of thirty (30)	days from the
	ce, or as soon thereafter as permitted by			and the Surety
shall thereupon be r	elieved from any liability for any acts of	omissions of the Principal subseq	uent to said date.	
		STORD STORY		
		S C		
Doted this 20th	day of September , 2015.	SEAD TO SEAD		
Dated this 30th	day of <u>September</u> , 2013.	VOIANAMIN	1 / / /	1
Mich	Li Million	\sim	Mul	
,,,,,,,	Principal		Principal	
(Individual, I	Partner or Corporate Officer)	•	(Additional Partner or Par	tners)

RLI Insurance Company

Vice President

#16-00 M-E CHSh NON-COM

R1331510-10,30



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

POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM0797904</u>

Know All Men by These Presents:

That the _		RLI Insurance (Company	, a co	rporation org	anized and ex	isting und	der the laws of t	he State of
		, and auth							
constitute	and appoint:	Ba	arton W. Davis	·	in the City of	` <u> </u>	Peori	a	_, State of
	Illinois	, asV	ice President	, with fu	ll power and	authority here	by confe	rred upon him/	her to sign,
execute, a	acknowledge a	and deliver for and	l on its behalf as	Surety, in ger	eral, any and	all bonds, un	dertaking	s, and recogniz	ances in an
amount r	not to exceed		One Million and	00/100	1	Dollars (1,000,0	00.00) for	any single
obligation	n, and specific	ally for the following	ing described bon	d.					
n · · ·	· T	Anala I assur Sassu	ions VI C						
Principal		Angle Lawn Serv		nme	nt is				
Obligee:		rd of Commission	The second second	y of Lake, St	ate of Indian	a, and any ci	ties and	towns in Lake	County, IN
Type Boi		n Care Contracto	<u> </u>			is named as Oblige	·e)		
		7hi						-	
Effective	Date: Sept	ember 30, 2015	the Lake	County	Record	ler!			
The	RI	LI Insurance Con	ipany.	further	certifies that	t the following	ng is a	true and exact	copy of a
		the Board of Direc							
Secreta underta underta	ry, or the Tr akings in the akings, Powe	es as the Board of easurer may app name of the Co es of Attorney of the printed by facs	ooint Attorneys i ompany. The co or other obligati	n Fact or A rporate seal	gents who sh is not neces	all have autlesary for the	ority to validity	issue bonds, p of any bonds	oolicies or , policies,
IN WITN	IESS WHERE	EOF, the	RLI Insur	nce Compa	CE	has caus	sed these	presents to be	executed by
its	Vice Presid	lent with	its corporate seal	affixed this_	<u>30th</u> day	of Septer	nber	, <u>2015</u> .	
ATTEST	: henie de	Montgomens	Hamman Hall	CORPORATE SEAL	3	urance Comp B.H. W	oany	_'	
Cherie L.	Montgomery	Ass	istant Secretary	SEAL	Barton W	. Davis		V	ice President
On thisandassaid corp	Cherie L. N Vi RLI I	September , Montgomery ice President nsurance Compa	, who being by and	me duly swo	rn, acknowled Assistant S	lged that they Secretary	signed th	e above Power	of Attorney, of the said
		eline M. E	Soller Notary Public	NOTARY E PUBLIC JA	"OFFICIAL SE, CQUELINE M, BO AMISSION EXPIRES O	AL" CKLER			



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Acknowledgment of Surety

STATE OF	Illinois)		
COUNTY OF	Peoria	} ss.		
On this <u>3</u>	Oth day of September	O Cuiman	he, al Stary Public in and fo	r said County, personally
appeared	Barton W. Davis O	, personally know	to me, who being by me duly	sworn did say that
he/she is the aforesaid	Tchrissida cu	ımentıis the	property ofnce Co	mpany
of <u>Peoria</u>			ecorder poration duly organized and e	
the State of	Illinois , that the	seal affixed to the for	regoing instrument is the corporate	orate seal of said
corporation, that the sa	id instrument was signed, se	aled and executed in l	ochalf of said corporation by a	authority of its Board of
Directors, and further a	acknowledge that the said in	strument and the exec	ution thereof to be a voluntary	act and deed of said
corporation.				. •
		TEDER'S OF	A.	
IN WITNES	SS WHEREOF, I have hereu	nto subscribed my na	and affixed by official seal	the day and year last
above written.		SEAL.		
My Commission Expir	res: NOTARY PUBLIC JAC STATE OF LILLINGIS COM	OFFICIAL SEAL* QUELINE M. BOCKLER MISSION EXPIRES 01/14/18		——————————————————————————————————————
1/14/2018			acqueline	M. Doller
			Jacqueline M. Bockler	Notary Public