



Bond 32S488772

2015 080626

LICENSE OR PERMIT BOND

KNOW ALL BY THESE PRESENTS, That we, TRIM-A-SEAL OF INDIANA, INC

as Principal, of 1500-1512 Polk Street

(Street and Number)

Gary INDIANA 46407 and the The Ohio Casualty Insurance Company, a
(City) (State)

New Hampshire corporation, as Surety, are held and firmly

bound unto BOARD OF COMMISSIONERS OF THE COUNTY OF LAKE, STATE OF INDIANA, AND ANY CITIES AND TOWNS IN LAKE COUNTY, INDIANA, as Obligees, in the sum of Five Thousand Dollars And Zero Cents

Dollars (\$5,000.00) for which sum, well and truly to be paid, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

Sealed with our seals, and dated this 31st day of December

THE CONDITION OF THIS OBLIGATION IS SUCH, THAT WHEREAS, the Principal has been or is about to be granted a license or permit to do business as General Contractor

by the Obligees.

NOW, THEREFORE, if the Principal well and truly comply with applicable local ordinances, and conduct business in conformity therewith, then this obligation to be void; otherwise to remain in full force and effect.

PROVIDED, HOWEVER:

- This bond shall continue in force:
 - Until December 31, 2016, or until the date of expiration of any Continuation Certificate executed by the Surety
 - OR
 - Until canceled as herein provided.
- This bond may be canceled by the Surety by the sending of notice in writing to the Obligees, stating when, not less than thirty days thereafter, liability hereunder shall terminate as to subsequent acts or omissions of the Principal.

** I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law. **

TRIM-A-SEAL OF INDIANA, INC

[Signature]

PRES.
Principal

HOWARD WEISS

The Ohio Casualty Insurance Company

By Timothy A. Mikolajewski
Timothy A. Mikolajewski, Assistant Secretary



STATE OF INDIANA
LAKE COUNTY
CLERK FOR RECORD
2015
MICHAEL B. BROWN
RECORDER
2015 DEC -2 PM 11:33

AMOUNT \$ 112
CASH CHARGE _____
CHECK # _____
OVERAGE _____
COPY _____
NON - COM
CLERK NR