



Bond 32S490331

LICENSE OR PERMIT BOND

KNOW ALL BY THESE PRESENTS, That we, JOHN MAIER CO

as Principal, of PO BOX 763

CHICAGO HEIGHTS ILLINOIS  
(City) (State)

(Street and Number) and the The Ohio Casualty Insurance Company, a

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 Oblige, 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 11th 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 SHEET METAL/HVAC

by the Oblige.

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:

1. This bond shall continue in force:

Until December 11, 2016, or until the date of expiration of any Continuation Certificate executed by the Surety

Until canceled as herein provided.

2. This bond may be canceled by the Surety by the sending of notice in writing to the Oblige, 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. \*\*

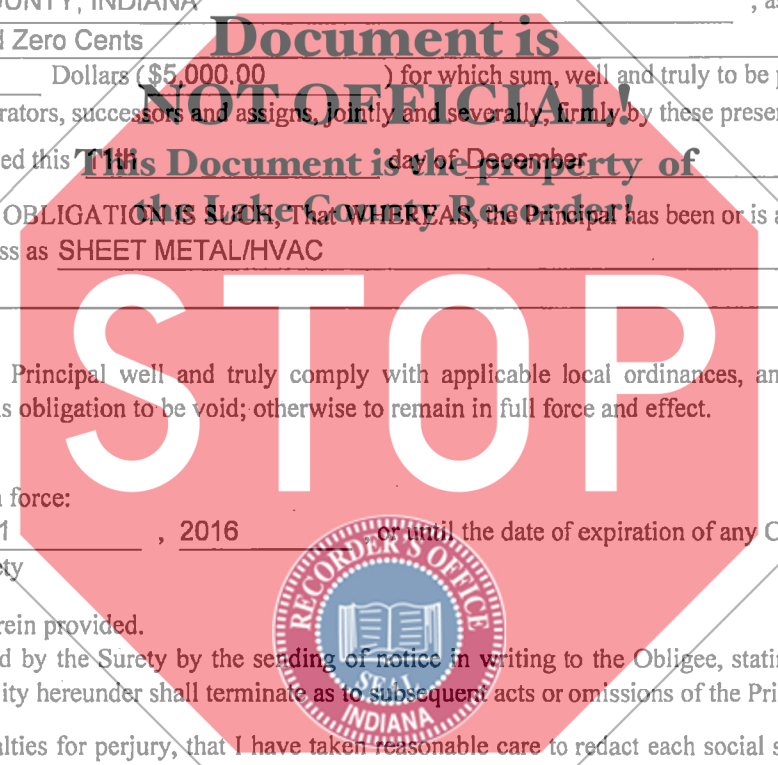
JOHN MAIER CO

*[Signature]*  
Principal

*[Signature]*

The Ohio Casualty Insurance Company

By *[Signature]*  
Timothy A. Mikolajewski, Assistant Secretary



2015 086419  
2015 DEC 2 PM 3:33  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORDER  
MICHAEL B. BROWN  
RECORDER

AMOUNT \$ 12.00  
CASH CHARGE  
CHECK# 15911  
OVERAGE  
COPY  
NON-CONF ✓  
DEPUTY *[Signature]*