

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

Principal

(Individual, Partner or Corporate Officer)

President/Owner

William C Ebbert

LICENSE AND PERMIT BOND

| | Bond No. <u>LSM1015362</u> | 2017 |
|--|---|-----------------------|
| KNOW ALL MEN BY THESE PRESENTS: That we, Ebberts Enterprises LLC | | 80640 |
| 7131 Clay St Merrillville, IN 46410 | | 0 |
| as Principal, and the RLI Insurance Composition of Indiana and a surety, are held an | | ousiness in the state |
| Board of Commissioners of the County of Lake Sta | te of Indiana and any cities and towns in Lake County-D | |
| in the penal sum of | Five Thousand and 00/100 | FE S |
| (\$ 5,000.00) DOLLARS, lawful money of the Unite made, we bind ourselves and our legal representatives, joint This Document The CONDITION OF THE ABOVE OBLIGATION IS SULandscape Contractor | ly and severally by these presents. | TEC - 7 (APM) |
| NOW, THEREFORE, if the said Principal shall faithfully perincluding all Amendments thereto, pertaining to the license | | |
| full force and effect for a period commencing on the | | |
| day of, 2018 . | Time | - dic |
| This bond may be terminated at any time by the Surety upor | sending written notice to the clerk of the Political Subdi- | vision with whom |
| this bond is filed and to the Principal, addressed to them at the | heir first known address, and at the expiration of thirty (30 | 0) days from the |
| mailing of said notice, or as soon thereafter as permitted by | applicable law, whichever is later, this bond shall termina | te and the Surety |
| shall thereupon be relieved from any liability for any acts or | omissions of the Principal subsequent to said date. | • |
| Dated this 27th day of June, 2017. | SEAL MOIANAMENT | |
| Rebeace REppert | | |

CORPORATE SEAL

RLI Insurance Company

By Brit W. Bridge

Principal

(Additional Partner or Partners)

Vice President

9 25,00

ash

M3



Phone: (309)692-1000 Fax: (309)683-1610

RLI Insurance Company

Bond No. <u>LSM1015362</u>

Know All Men by These Presents:

| That the | | RLI Insurance Co | mpany | , a corporation | organized and existin | g under the laws o | of the State of |
|---------------------------------------|--|--|---|---|--|---|---|
| | Illinois | , and authori | zed and licensed t | o do business in all: | states and the District | of Columbia does | hereby make, |
| constitut | e and appoint: | Barte | on W. Davis | in the Cit | ty of | Peoria | , State of |
| | Illinois | , asVice | e President | _, with full power | and authority hereby | conferred upon hi | m/her to sign, |
| execute, | acknowledge a | nd deliver for and o | n its behalf as Su | rety, in general, any | and all bonds, underta | akings, and recogr | nizances in an |
| amount | not to exceed | O | ne Million and 00 | /100 | Dollars (<u>\$1,0</u> | 00,000.00) fo | or any single |
| | | ally for the following | | | | | |
| Principa | d: <u>Ebb</u> e | erts Enterprises LL | c / | | | | |
| - | | | Doc | umenti | diana, and any cities | | CI A VBY |
| Obligee: | Boar | d of Commissioner | Valid only wh | on a County, City, Town or \ | thana, and any cities /illage is named as Obligee) | and towns in Lak | e County, IN |
| Type Bo | ond: <u>Lanc</u> | rd of Commissioner dscape Contractor | NOT | DEFICI | AL! | | |
| Bond A | mount: <u>\$ 5</u> | ,000.00 Th | <u>is Docume</u> | ent is the pro | operty of | | |
| Effective | e Date: <u>June</u> | 27, 2017 | the Lake (| County Reco | order! | | |
| The | RI | I Insurance Compa | anv | further certifies | that the following i | s a true and exa | ct copy of a |
| | | | | | Company | | 7 - |
| Secreta undert undert corpor | ary, or the Trakings in the akings, Power ate seal may b | easurer may appoint name of the Comes of Attorney or e printed by facsim | nt Attorneys in pany. The corp other obligation ile." | Fact or Agents who orate seal is not not the corporation the corporation to Company | lent, any Vice Preside o shall have authoring the value on. The signature of has caused to day of June | ty to issue bonds idity of any bon of any such office these presents to b | , policies or ds, policies, cer and the |
| ATTEST | | Montgamery Assista | unt Secretary | SEAL | Insurance Company B. A. W. Don W. Davis | 5 . | Vice President |
| On this | 27th day of Cherie L. N Vi RLI Interpretation. | June , 20 Montgomery ce President nsurance Company | 017 before me, a , who being by me and | and acknowledged | onally appeared wledged that they sign ant Secretary I said instrument to b | ed the above Pow, respective | er of Attorney ly, of the said |
| Jacquelin | e M. Bockler | rine M. E | Notary Public | PUBLIC IACQUELINE A | ₽ | | |



RLI Insurance Company 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 <u>27</u> | th day of June | 201711 before 1 | e, a Notary Public in and | for said County, personally |
| appeared | Barton W. Davis T | personally known | to me, who being by me d | uly sworn did say that |
| he/she is the aforesaid | Vic Presiden ocun | nevithis the | propett Justine | Company |
| of <u>Peoria</u> | , the Lake | County R | econder organized and | d existing under the laws of |
| the State of | Illinois , that the seal | affixed to the fore | going instrument is the co | rporate seal of said |
| corporation, that the sa | id instrument was signed, sealed | and executed in bo | chalf of said corporation by | y authority of its Board of |
| | cknowledge that the said instrum | nent and the execut | tion thereof to be a volunta | ary act and deed of said |
| corporation. | | EDER'S OF | | |
| IN WITNES | S WHEREOF, I have hereunto | subscribed my nam | e and affixed by official s | eal the day and year last |
| above written. | | EAL WOIANA | | |
| My Commission Expir | PUBLIC F IACQUEL | ICIAL SEAL" INE M. BOCKLER IN EXPIRES 01/14/18 | | - 7 |
| 1/14/2018 | | ······································ | acqueline M. Hockler | M. Doeller Notary Public |