

## LICENSE OR PERMIT BOND

## STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2019 JUN 20 PM 2: 00

Bond 999005901

MICHAEL B. BROWN

KNOW ALL BY THESE PR	ESENTS, That we	e, Dornick Renov	ations, Inc.		
					as Principal, of
238 Locust St.		(Street and Nun	shor)		,
TT 1	T., J.	20		t T	
Hammond (City)	, <u>Indiana</u>		nd the The Ohio Casualt	ty insurance Con	ipany ,
a New Hampshire		50 5	and firmly bound unto	Board of Com	missioners of the
County of Lake, State of Indi					gee, in the sum of
Five Thousand Dollars And 2		s and Towns in L	ake County, Indiana	, 40 001	goo, in the ball of
	000.00	DOCUMA	in, well and truly to be	naid we hind ou	urgelyes our heirs
executors, administrators, suc		is, jointly and sev	verally, firmly by these	presents.	irserves, our nens,
Sealed with our seals, and da	ted this hoth Dog	cdaynofeJusteis t	he prope <mark>2019</mark> of		
/			y Recorder!		
THE CONDITION OF THE				ncinal has been	or is about to be
granted a license or permit to				icipai mas occir	or is about to be
					by the Obligee.
NOW, THEREFORE, if the	Principal well and	d truly comply y	with applicable local or	dinances and co	anduct business in
conformity therewith, then th					madet basiness in
PROVIDED, HOWEVER		TUTTE DE	The state of the s		
1. This bond shall continue		STUBBER 3	Office and the state of the sta	of distinction of	Same Continuation
✓ Until 10th	day of June atted by the Surety	, 2020	, or until the date	e of expiration of	any Continuation
OR	hed by the surety				
Until canceled as	s herein provided.	E A SEAL			
2. This bond may be cance		The state of the s			
than thirty days thereafte	r, liability hereund	ler shall terminat	e as to subsequent acts of	or omissions of the	ne Principal.
**I affirm, under the penalties f	or perjury, that I	1	Dornick Renovations, In	nc.	
have taken reasonable care to re			H	///	
security number in this documer required by law.**	nt, unless				
required by law.			/i /// //	////	
		2 2 2	By /W// // \	1011	
00					Principal
AMOUNT \$					
CASH CHARGE		PLTY INSUR	The Ohio Casualty I	nsurance Compa	ny
CHECK #	(:	SUAL ORPORATES PAR			
OVERAGE		o 1919 o	By Timothy A. Mil	Lolojewoli	
COPY		O WHAMPSHIT	Timothy A. Mikolaje		Attorney-in-Fact
NON-COM	<del>)                                    </del>	* * *	Timomy A. Wikolaji	C W SKI	1 ttorney-iii-i det
CLERK					



The Ohio Casualty Insurance Company

## POWER OF ATTORNEY

Principal: Dornick Renovations, Inc.					
Agency Name: KOESTER & BROWN INSURANCE INC	Bond Number: 999005901				
Obligee: Board of Commissioners of the County of Lake, State of Indiana, and any Cities and Towns in Lake County, Indiana					
Bond Amount: (\$5,000.00 ) Five Thousand Dollars And Zero Cents					

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint Timothy A. Mikolajewski in the city and state of Seattle, WA, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surely obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 26th day of September, 2016.

The Ohio Casualty Insurance Company

The Ohio Ca INSU The Ohio Casualty Insurance Company On this 26th day of September, 2016, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance

STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY

Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.



This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty insurance Company, which is now in full force and effect reading as follows:

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surely bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 10th 2019 day of June



Renee C. Llewellyn, Assistant Secretary