

Master Plumber Code Compliance Continuation Bond

(To be completed by your Surety Company.)

The \$40 filing fee must be submitted with this bond, made payable to the Minnesota Department of Health. Checks returned for nonpayment will be charged a \$20 fee (M.S. 332.50, subd. 2). A Certificate of Insurance may be submitted. An Acord form or any other certificate of insurance will not be accepted.

Master Plumber Name James E. Froehle Bond No. 285-001-534
Type or Print (do not enter the plumbing company name)

Address 7340 Washington Avenue South Eden Prairie MN 55344 (612) 941-7010
Street City State Zip Phone No.

Plumbing Company Name Metropolitan Mechanical Contractors Inc.
Type or Print. Must be the same as filed the previous year.

Address 7340 Washington Avenue South, Eden Praire MN 55344 (612) 941-7010
Street (Must be the same as filed the previous year.) City State Zip Phone No.

Date Original Bond Issued 01 / .01 / 01 in the amount of \$25,000 as required by statutes.

Surety Company Name Liberty Mutual Insurance Company
Type or Print

Address 1001 Warrenville Rd., Lisle IL 60532 (630) 724-0835
Street City State Zip Phone No.

The bond described above, and to which this certificate is attached, is hereby continued in force from the date of last renewal for an extended term ending **December 31, 2002**.

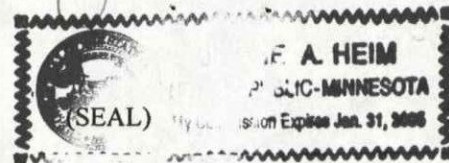
Dated this 17th day of September 2001.

James E. Froehle Pm003722
Master Plumber's Signature License No.

State of Minnesota)
COUNTY OF Scott)
Subscribed and sworn before me

Jeanne A. Heim 11 / 12 / 01
Notary Public Date
My commission expires 1 / 1

NOV 2001
FILED
Liberty Mutual Insurance Company
Surety Company Name
Nancy Lawman
Authorized Signature of Surety



Notice to Individual Applicants: Under Minnesota Statutes 13.41, all data, except your name and address, submitted in this application are considered private until you are issued a credential. When you become credentialed, all data in this application become public, except your social security number.

Notice to Corporate Applicants: Under Minnesota Statutes 13.41, all data submitted in this application are public, except for the social security number of any responsible person, which is private.

If you require this document in another format, such as large print, Braille, or cassette tape, call (651)215-0700, TDD (651)215-0707 or for Greater Minnesota through the Minnesota Relay Service at (800)627-3529 and ask for (651)215-0700.

RETURN: Bond form, certificate of insurance (if submitted) and \$40 filing fee to:



Minnesota Department of Health
Plumbing Program
121 East Seventh Place, Suite 220
P.O. Box 64975
St. Paul, MN 55164-0975
(651)215-0836

Office use only: Fee: \$40/cche/237235
Deposit Date: NOV 15 2001
Deposit No.: 071

0104165

This Power of Attorney limits the act of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

LIBERTY MUTUAL INSURANCE COMPANY
BOSTON, MASSACHUSETTS

POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS: That Liberty Mutual Insurance Company (the "Company"), a Massachusetts mutual insurance company, pursuant to and by authority of the By-law and Authorization hereinafter set forth, does hereby name, constitute and appoint, MARY BOWMAN, JOEL DUCKWORTH, RANDY MARGISON, NANCY MARKL, ALL OF THE CITY OF VERNON HILLS, STATE OF ILLINOIS.

, 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 surety obligations in the penal sum not exceeding FIFTY MILLION AND 00/100***** DOLLARS (\$ 50,000,000.00*****) each, and the execution of such bonds or undertakings, in pursuance of these presents, shall be as binding upon the Company as if they had been duly signed by the president and attested by the secretary of the Company in their own proper persons.

That this power is made and executed pursuant to and by authority of the following By-law and Authorization:

ARTICLE XVI - Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer or other official of the company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the company by their signature and execution of any such instruments and to attach thereto the seal of the company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

By the following instrument the chairman or the president has authorized the officer or other official named therein to appoint attorneys-in-fact:

Pursuant to Article XVI, Section 5 of the By-laws, Assistant Secretary Garnet W. Elliott is hereby authorized to appoint such attorneys-in-fact as may be necessary to act in behalf of the company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

That the By-law and the Authorization above set forth are true copies thereof and are now in full force and effect.

IN WITNESS WHEREOF, this instrument has been subscribed by its authorized officer and the corporate seal of the said Liberty Mutual Insurance Company has been affixed thereto in Plymouth Meeting, Pennsylvania this 21st day of November, 2000.



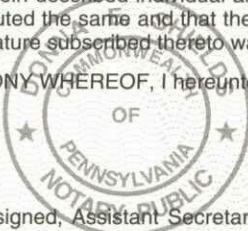
LIBERTY MUTUAL INSURANCE COMPANY

By Garnet W. Elliott
Garnet W. Elliott, Assistant Secretary

COMMONWEALTH OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 21st day of November, A.D. 2000, before me, a Notary Public, personally came the individual, known to me to be the therein described individual and officer of Liberty Mutual Insurance Company who executed the preceding instrument, and he acknowledged that he executed the same and that the seal affixed to the said preceding instrument is the corporate seal of said company; and that said corporate seal and his signature subscribed thereto was duly affixed and subscribed to the said instrument by authority and direction of the said company.

IN TESTIMONY WHEREOF, I hereunto set my hand and affix my official seal at Plymouth Meeting, PA, the day and year first above written.



NOTARIAL SEAL
DONNA E. SHIELDS, Notary Public
Plymouth Twp., Montgomery County
My Commission Expires Feb. 2, 2002

Donna E. Shields
Notary Public

CERTIFICATE

I, the undersigned, Assistant Secretary of Liberty Mutual Insurance Company, do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the officer who executed the said power of attorney was one of the officers specially authorized by the chairman or the president to appoint any attorney-in-fact as provided in Article XVI, Section 5 of the By-laws of Liberty Mutual Insurance Company.

This certificate may be signed by facsimile under and by authority of the following vote of the board of directors of Liberty Mutual Insurance Company at a meeting duly called and held on the 12th day of March, 1980.

VOTED that the facsimile or mechanically reproduced signature of any assistant secretary of the company wherever appearing upon a certified copy of any power of attorney issued by the company, shall be valid and binding upon the company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said company, this 1st day of January, 2002.



John P. ...
Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, bank deposit, currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call 1-610-832-8240 between 9:00 am and 4:30 pm EST on any business day.