

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 Alan Wildman Bond No. RED1058613
Type or Print (do not enter the plumbing company name)

Address 4550 Central Ave., #1508 Hilltop, MN 55421 (763) 586-8079
Street City State Zip Phone No.

Plumbing Company Name Wildman Plumbing
Type or Print. Must be the same as filed the previous year.

Address 4550 Central Ave., #1508, Hilltop, MN 55421 (763) 586-8079
Street (Must be the same as filed the previous year.) City State Zip Phone No.

Date Original Bond Issued 12 / . 31 / 1999 in the amount of \$25,000 as required by statutes.

Surety Company Name REDLAND INSURANCE COMPANY
Type or Print

Address 535 WEST BROADWAY COUNCIL BLUFFS IA 51502 (800) 788-2663
Street City State Zip Phone No.

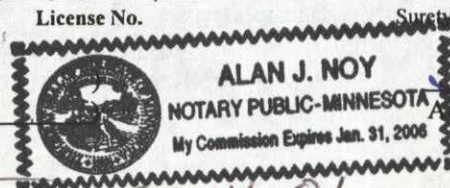
The bond described above, and to which this certificate is attached, is hereby continued in force from the date of last renewal for an extended term ending **December 31, 2002**.

Dated this 19TH day of DECEMBER, 2001.

Alan Wildman 004189 PM
Master Plumber's Signature

State of Minnesota
COUNTY OF Aitkin
Subscribed and sworn before me

[Signature]
Notary Public
My commission expires 1 31 106



REDLAND INSURANCE COMPANY

Surety Company Name

Tamara L. Shinder
Authorized Signature of Surety
TAMARA L. SHINDER, ATTORNEY-IN-FACT
(SEAL)

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: 40.00 PCK 11860

Deposit Date: DEC 21 2007

Deposit No.: 095

0104984

REDLAND INSURANCE COMPANY
POWER OF ATTORNEY

RED 1087862

KNOW ALL MEN BY THESE PRESENTS, THAT REDLAND INSURANCE COMPANY does hereby make, constitute and appoint

TAMARA L. SHINDER * GEOFFREY HATHAWAY * DENNIS LARSON * JACK ANDERDON * CHERYL MONSON
CHERYL L. BLOBERGER * JAN MARIE SACHARIASON OF GOLDEN VALLEY, MINNESOTA

its true and lawful Attorney-in-Fact, to make, execute and deliver on its behalf Surety bonds, undertakings and other instruments of similar nature as follows:

ALL WRITTEN INSTRUMENTS IN AN AMOUNT NOT TO EXCEED \$1,000,000.00

This Power of Attorney is granted and sealed under and by the authority of the following Resolution adopted by the Board of Directors of the Company on the 18th day of October, 1993.

"RESOLVED, that the Chairman of the Board, the President, an Executive Vice President or a Vice President be, and that each of them is, authorized to execute Powers of Attorney qualifying the Attorney-in-Fact named in the given Power of Attorney to execute in behalf of the Company, bonds, undertakings and other instruments of similar nature, and said officers may rename any such Attorney-in-Fact or agent and revoke any Power of Attorney previously granted to such person.

FURTHER RESOLVED, that an Assistant Secretary be, and that each or any of them hereby is, authorized to attest the execution of any such Power of Attorney, and to attach thereto the seal of the Company.

FURTHER RESOLVED, that the signatures of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be binding upon the company when so affixed and in the future with respect to any bond, undertaking or instruments of similar nature to which it is attached."

IN WITNESS WHEREOF, REDLAND INSURANCE COMPANY has caused its official seal to be hereunto affixed, and these presents to be signed by its President this 15th day of September, 1999.

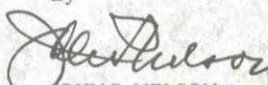
Attest:

REDLAND INSURANCE COMPANY



PETER A. KNOLLA
Secretary

By



JOHN P. NELSON
President

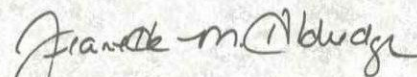
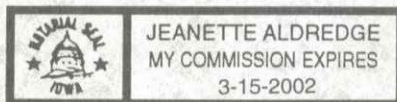


STATE OF IOWA

COUNTY OF POTTAWATTAMIE

} s.s.: Council Bluffs

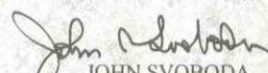
On this 15th day of September, 1999 before me personally came John P. Nelson, to me known, who being by me duly sworn, did depose and say that he is President of REDLAND INSURANCE COMPANY the corporation described in and which executed the above instrument; that he knows the seal of the said corporation, that the seal affixed to the said document is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation and that he signed his name thereto by like order.



JEANETTE ALDREDGE
NOTARY PUBLIC
My Commission Expires March 15, 2002

I, the undersigned, Vice President of REDLAND INSURANCE COMPANY an Iowa corporation, **DO HEREBY CERTIFY** that the foregoing and attached Power of Attorney remains in full force and has not been revoked; and furthermore that the Resolution of the Board of Directors, set forth in the said Power of Attorney, is now in force.

Signed and sealed at the city of Council Bluffs, in the State of Iowa, dated the 19TH day of DECEMBER, 2001
ALAN WILDMAN/WILDMAN PLUMBING


JOHN SVOBODA
Vice President

THIS DOCUMENT IS NOT VALID UNLESS PRINTED ON GREY SHADED BACKGROUND WITH A RED SERIAL NUMBER IN THE UPPER RIGHT HAND CORNER. THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK-HOLD AT AN ANGLE TO VIEW. IF YOU HAVE ANY QUESTIONS CONCERNING THE AUTHENTICITY OF THIS DOCUMENT, YOU ARE URGED TO CONTACT OUR POWER OF ATTORNEY CUSTODIAN AT 1-800-394-7806.