

UNLICENSED PLUMBING CONTRACTOR BOND
(Applies to all persons other than licensed master plumbers.)
TO BE COMPLETED BY YOUR SURETY COMPANY

BOND NO. 3-315-000

Buelow Excavating

of

Company Name, if none, the plumbing contractor's name.

13254 20th Street North Stillwater, MN 55082

Plumbing Company Address

as principal, and Ohio Casualty Insurance Company

City State Zip

Surety Company Name

Telephone No.

136 North Third Street Hamilton, OH 45025

Surety Company Address

City

State

Zip

a corporation licensed to do business in the State of Minnesota, as Surety, are jointly and severally held and firmly bound to the State of Minnesota, as Oblige, in the sum of TWENTY FIVE THOUSAND DOLLARS (\$25,000) for the payment of which, we bind ourselves, our heirs, executors, administrators, successors, and assigns firmly by these presents.

NOW, THEREFORE, the condition of this obligation is such that, if the undersigned Principal or such persons authorized to perform plumbing under the Principal's supervision performs plumbing in compliance with the plumbing code as required pursuant to Minnesota Rules, Chapter 4715, then this obligation shall be null and void; otherwise, it shall remain in full force and effect for a period not to exceed one year ending December 31st. The period of this bond is August 17, 2000 through December 31, 2000. During the term of this obligation, the Principal and Surety will pay unto the Oblige, or as otherwise directed by the Oblige, the amount needed to correct noncomplying plumbing work, not to exceed TWENTY FIVE THOUSAND DOLLARS (\$25,000) for the benefit of persons injured or suffering financial loss by reason of failure to comply with the requirements of the plumbing code, Minnesota Rules, Chapter 4715.

FURTHERMORE, it is understood and agreed that:

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1. The aggregate liability of the Surety hereunder pertains to all claims arising during the period defined above.
2. In the event the bond does not provide for correction of all noncomplying plumbing work, the bond paid by the undersigned Surety does not relieve the undersigned Principal of liability for correcting noncomplying plumbing work by said Principal or persons working under said Principal's supervision.
3. This bond is a continuous obligation which may be canceled at any time as to further liability upon the Surety's giving at least fifteen (15) days written notice to the Commissioner of Health. In the event of cancellation, the Surety shall not be discharged from any liability already accrued under this bond, or which shall accrue hereunder before the expiration of the fifteen (15) day notice period.

Signed and sealed this 17th day of August, 2000.

John Buelow

Buelow Excavating

PRINT - Plumbing Contractor Name

Yahn Buelow

Signature

PRINCIPAL

SURETY CORP. Ohio Casualty Insurance Co.

By

Attorney in Fact

THE REVERSE SIDE OF THIS FORM MUST ALSO BE COMPLETED AND THE POWER OF ATTORNEY ATTACHED.

\$40 POK-5563

AUG 18 2000

029

1-402 P. 002/003 F-357

262-784-1287

FROM-OHIO-CASUALTY GROUP BRKFLD

AUG-16-2000 12:02pm

Received: 16 Aug 00 01:02 PM From: 26278441287 To: 5085195891

YOU MUST COMPLETE A or B and C

A.
ACKNOWLEDGEMENT OF INDIVIDUAL OR PARTNERSHIP CONTRACTOR

STATE OF MINNESOTA }
County of Washington } ss.

On this 17th day of August, 2005, personally came John Buelow
to me well known to be the identical person(s) described in and who executed the foregoing
bond and he/she/they acknowledged the same to be his/her/their own free act and deed.

Notary Public

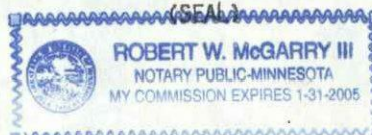
Date

8/17/05

My commission expires

Date

1/31/05



B.
ACKNOWLEDGEMENT OF CORPORATE CONTRACTOR

STATE OF MINNESOTA }
County of _____ } ss.

On this _____ day of _____, _____, personally came _____ who
being by me duly sworn, did say that he/she is _____ of _____
a _____ corporation;
and that said instrument was executed in behalf of the corporation by authority of its
Board of Directors; that he/she acknowledged said instrument to be the free act and deed
of the corporation.

Notary Public

Date

(SEAL)

My commission expires

Date

_____/_____/_____

C.
ACKNOWLEDGEMENT OF CORPORATE SURETY

STATE OF MINNESOTA }
County of Washington } ss.

On this 17th day of August, 2005, personally came Robert W McGarry III and _____
to me personally known, who being by me duly sworn, did say that
he/she is the attorney in fact, of The Ohio Casualty Insurance Co, the
corporation whose name is affixed to the foregoing instrument; that the seal affixed to
the foregoing instrument is the corporate seal of the said corporation; and that said
instrument was executed in behalf of said corporation by authority of its board of
directors and said Robert W McGarry III acknowledged that he/she executed said
instrument as attorney in fact as the free act and deed of said corporation.

Notary Public

Date

8/17/05

My commission expires

Date

1/31/05



CERTIFIED COPY OF POWER OF ATTORNEY
THE OHIO CASUALTY INSURANCE COMPANY

HOME OFFICE, HAMILTON, OHIO

No. 30-579

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, in pursuance of authority granted by Article VI, Section 7 of the By-Laws of said Company, does hereby nominate, constitute and appoint:

Robert W. McGarry III - - - - - of **Stillwater, Minnesota** - -
its true and lawful agent and attorney -in-fact, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES, not exceeding in any single instance

FIVE HUNDRED THOUSAND - - - - - (\$ **500,000.00** - -) Dollars,
excluding, however, any bond(s) or undertaking(s) guaranteeing the payment of notes and interest thereon

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Company at its office in Hamilton, Ohio, in their own proper persons.

The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(s)-in-fact.



In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of the said The Ohio Casualty Insurance Company this **7th** day of **November** 19 **94**.

Lloyd E. Geary

Assistant Secretary

STATE OF OHIO,
COUNTY OF BUTLER

} ss.

On this **7th** day of **November** A. D. 19 **94** before

the subscriber, a Notary Public of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came Lloyd E. Geary, Assistant Secretary of THE OHIO CASUALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn depose and saith, that he is the officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate Seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Hamilton, State of Ohio, the day and year first above written.

Cheryl S. Gregory

Notary Public in and for County of Butler, State of Ohio

My Commission expires **August 5, 1997**.

This power of attorney is granted under and by authority of Article VI, Section 7 of the By-Laws of the Company, adopted by its directors on April 2, 1954, extracts from which read:

"ARTICLE VI"

"Section 7. Appointment of Attorney-in-Fact, etc. The chairman of the board, the president, any vice-president, the secretary or any assistant secretary shall be and is hereby vested with full power and authority to appoint attorneys-in-fact for the purpose of signing the name of the Company as surety to, and to execute, attach the corporate seal, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation, or the official representative thereof, or to any county or state, or any official board or boards of county or state, or the United States of America, or to any other political subdivision."

This instrument is signed and sealed by facsimile as authorized by the following Resolution adopted by the directors of the Company on May 27, 1970:

"RESOLVED that the signature of any officer of the Company authorized by Article VI Section 7 of the by-laws to appoint attorneys in fact, the signature of the Secretary or any Assistant Secretary certifying to the correctness of any copy of a power of attorney and the seal of the Company may be affixed by facsimile to any power of attorney or copy thereof issued on behalf of the Company. Such signatures and seal are hereby adopted by the Company as original signatures and seal, to be valid and binding upon the Company with the same force and effect as though manually affixed."

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company, do hereby certify that the foregoing power of attorney, Article VI Section 7 of the by-laws of the Company and the above Resolution of its Board of Directors are true and correct copies and are in full force and effect on this date.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Company this

17th day of **Aug.** A.D., **19 2000**



Mark I. Schmidt

Assistant Secretary