, Unlicensed Plumbing Contractor Continuation Bond (To be completed by your surety company.)

The \$40 filing fee must be submitted with this bond form, payable to the Minnesota Department of Health. Checks returned for nonpayment will be charged a \$20 fee (M.S. 332.50, subd. 2).					
Plumbing Contractor's Name LYLE LUMBAR			Bo	ond No. <u>T218331</u>	
Type or Print (do not enter the	plumbing company name)			
Address 137 166TH AVE. NE, HAM LA	KE MN 55304			(763) 434-6197	
Street	City	State	Zip	Phone No.	
Company Name <u>LUMBAR MECHANICAL</u> Type or Print. Must be the same as filed the pr	evious year.	-			
Address 169 JAMES AVE. N.	MINNEAPOLIS,	MN 55405		(612) 377-6533	
Street (Must be the same as filed the previous year.)	City	State	Zip	Phone No.	
Date Original Bond Issued <u>09 / 18 / 200</u> Surety Company Name <u>EMPLOYERS MUTUAL C</u> Type or Print			ired by	statute.	
Type or Print				12 - 12	
Address 717 MULBERRY ST.	DES MOINES	IA 5030	9	Sm T (S)	
Street	City	State	Zip	Phone No. WAR LEDERARY	
The bond described above, and to which this certificate extended term ending December 31 , 2002 Dated this 29TH day of JANUARY	is attached, is hereb , 2002 .	y continued in fo	rce from	the date of last renewal for an	
Dated this day of	, <u>2002</u>			02122220	
Jul Lembar	EMPLOY	ERS MUTUAL	CASUAI	JTY COMPANY	
Plumbing Contractor's Signature	Surety (Company Name			
State of Minnesota	A	in City	in		
County of Henrepin)	Authorized	Signature of Supery			
Subscribed and sworn before me		KINGERY, AT	TOOTES	TN FACT	
Shues Junker 1 1301	the second s	3 5111-1		EILA LUMBAR	
Notary Public Date My commission expires / / 31 / 05	(SI	EAL)	NOTAR	Y PUBLIC-MINNESOTA SSION EXPIRES 1-31-2005	

Notice to Individual Applicants: Under Minnesota Statu					
application are considered private until you are issued a	credential. When ye	ou become crede	ntialed,	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 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 Phone: (651)215-0836.

Office Use	Only: Fee: #40 CCk 18934	2
	1-23-02	
Deposit No.:	113	

0200946 3/2000

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE	PAPER • BACK OF THIS DOCUMENT HAS A SIMULATED WATERMARK - HOLD AT AN ANGLE TO VIEW.			
, EMC Ins	surance Companies			
P.O. Box	No. 467942			
CERTIFICATE OF AUTHORITY INDIVIDUAL ATTORNEY-IN-FACT				
KNOW ALL MEN BY THESE PRESENTS, that:				
1. Employers Mutual Casualty Company, an Iowa Corporation 5. Dakota Fire Insurance Company, a North Dakota Corporation 2. EMCASCO Insurance Company, an Iowa Corporation 6. EMC Property & Casualty Company, an Iowa Corporation 3. Union Insurance Company of Providence, an Iowa Corporation 7. The Hamilton Mutual Insurance Company, an Ohio Corporation 4. Illinois EMCASCO Insurance Company, an Illinois Corporation 7. The Hamilton Mutual Insurance Company, an Ohio Corporation				
hereinafter referred to severally as "Company" and collectively as "Companies", each does, by these presents, make, constitute and appoint: KATHY KINGERY, INDIVIDUALLY, DES MOINES, IOWA				
its true and lawful attorney-in-fact, with full power and authority conferred to sign, seal, and execute its lawful bonds, undertakings, and other obligatory instruments of a similar nature as follows:				
A	NY AND ALL BONDS			
and to bind each Company thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of each such Company, and all of the acts of said attorney pursuant to the authority hereby given are hereby ratified and confirmed.				
The authority hereby granted shall expire April 1, 2002	uniess sourier revoked.			
AUTHORITY	FOR POWER OF ATTORNEY			
This Power-of-Attorney is made and executed pursuant to and by the authority of the following resolution of the Boards of Directors of each of the Companies at a regularly scheduled meeting of each company duly called and held in 1999:				
and authority to (1) appoint attorneys-in-fact and authorize them to execute on behalf of each Company and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and (2) to remove any such attorney-in-fact at any time and revoke the power and authority given to him or her. Attorneys-in-fact shall have power and authority, subject to the terms and limitations of the power-of-attorney issued to them, to execute and deliver on behalf of the Company, and to attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and any such instrument executed by any such attorney-in-fact shall be fully and in all respects binding upon the Company. Certification as to the validity of any power-of-attorney authorized herein made by an officer of Employers Mutual Casualty Company shall be fully and in all respects binding upon this Company. The facsimile or mechanically reproduced signature of such officer, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power-of-attorney of the Company, shall be valid and binding upon the Company with the same force and affect as though manually affixed.				
8th day of March 1999	to be signed for each by their officers as shown, and the Corporate seals to be hereto affixed this $R = 100$			
Seals	Bruce & Kelley Affrey & Bindaley			
SEAL CONSUME CONSUMERATION CONFORMATION CONF	of Companies 2, 3, 4, 5 & 6; President of Company 1; Vice Chairman and CEO of Company 7			
SEAL ON SEAL SEAL SEAL SEAL SEAL SEAL SEAL SEAL	On this 8th day of March AD 1999 before me a Notary Public in and for the State of Iowa, personally appeared Bruce G. Kelley and Jeffrey S. Birdsley, who, being by me duly sworn, did say that they are, and are known to me to be the Chairman, President, Vice Chairman and CEO, and/or Assistant Secretary, respectively, of each of The Companies above; that the seals affixed to this instrument are the seals of said corporations; that said instrument was signed and sealed on behalf of each of the Companies by authority of their respective Boards of Directors; and that the said Bruce G. Kelley and Jeffrey S. Birdsley, as such officers, acknowledge the execution of said instrument to be the voluntary act and deed of each of the Companies. My Commission Expires September 30, 2003.			
RUTA KRUMINS Commission Number 176255	Ruta Krumina)			
Commission Number 170235 My Comm. Exp. Sept. 30, 2003	Notary Public in and for the State of Iowa			
CERTIFICATE I, David L. Hixenbaugh, Vice President of the Companies, do hereby certify that the foregoing resolution of the Boards of Directors by each of the March 8, 1999 on behalf of Kathy Kingery				
are true and correct and are still in full force and effect. In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this <u>14TH</u> day of <u>NOVEMBER</u> , <u>2000</u>				
Vice-President				
Form 7832 (4/01) "For verification of the authenticity of the Power of Attorney you may call (515) 280-2689."				
Torvernication or the authenticity of th	er ower of Auginey you may can (515) 200-2003.			

..