## 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 Harold Askelson, Jr.	Bond No. 69343007
Type or Print (do not enter the plumbing company name)	
Address 25296 E. Cozy Cove Rd., Detroit Lakes, MN	56501 (218) 847-9441
Street City	State Zip Phone No.
Plumbing Company Name <u>Harold's Plumbing &amp; Heat</u> Type or Print. Must be the same as filed the previous year.	ing 123456780
3,500 2.224 1.200 0.200 1	(5) A
Address 25296 E. Cozy Cove Rd., Detroit Lake	s. MN 56501 (218) 847-9441 ann
Street (Must be the same as filed the previous year.)  City	State Zip Phone No. FILED (MN) SECRETARY
Date Original Bond Issued 05 / 16 / 02 in the	amount of \$25,000 as required by statutes.
Surety Company Name WESTERN SURETY COMPANY  Type or Print	20202122233
Address 101 S. Phillips Ave., Sioux Falls, SD 57	7104-6703
Street City	State Zip Phone No.
The bond described above, and to which this certificate is attached, is here extended term ending December 31,2004  Dated this29thday ofDecember	by continued in force from the date of last renewal for an  .  WESTERN SURETY COMPANY
Master Plumber's Signature	Surety Company Name
State of Minnesota Becker  COUNTY OF Becker  Subscribed and sworn before the  Notary Public  My commission expires 12 131 1 2005	Authorized Signature of Surety J. Cavanaugh, Ass't. Sec.  ROBIN CIRSON  OTARY PUBLIC - MINNESOTA  My Commission Expires Jan. 31, 2005
Notice to Individual Applicants: Under Minnesota Statutes 13.41, all data, application are considered private until you are issued a credential. When 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:

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DEF	A	RT	ME	NT	OF	HE	AL	TH	

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: 4529
Deposit Date:

MAR 0 2 2004

Deposit No .:

159

0404167

## Western Surety Company

## **POWER OF ATTORNEY**

## KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

J. Cavanaugh	of Sioux	Falls
State of South Dakota		Assistant Secretary
as Attorney-in-Fact, with full power and and on its behalf as Surety and as its ad		n him to sign, execute, acknowledge and deliver asses of documents to-wit:
equity, policies indemnifying employers again fidelity bonds. Indemnity in all cases when	inst loss or damage caused by the mi re indemnity may be lawfully given; all ond or document executed for this Cor	be given in any action or proceeding in any court of law hisconduct of their employees; official, bail, and surety a and with full power and authority to execute consents a mpany, and to compromise and settle any and all claims
Western Surety Company further certificompany duly adopted and now in force, to-		exact copy of Section 7 of the by-laws of Western Sur
corporate name of the Company by the Pre officers as the Board of Directors may auth- may appoint Attorneys-in-Fact or agents who	esident, Secretary, any Assistant Secr orize. The President, any Vice Presidents o shall have authority to issue bonds, p ty of any bonds, policies, undertakings,	r obligations of the corporation shall be executed in the retary, Treasurer, or any Vice President, or by such other, Secretary, any Assistant Secretary, or the Treasure oblicies, or undertakings in the name of the Company. To, Powers of Attorney or other obligations of the corporations.
In Witness Whereof, the said WESenior Vice President		as caused these presents to be executed by i
a. Viero	W	ESTERN SURETY COMPANY
a. Otto	Assistant Secretary By	Paul T. Bruflat, Senior Vice Preside
STATE OF SOUTH DAKOTA		
COUNTY OF MINNEHAHA		
On this 29th day of Dec	cember , 2003	, before me, a Notary Public, personally appeared. A. Vietor
who, being by me duly sworn, acknowled	dged that they signed the above P of the said WESTERN SURETY Co oration.	
+00000000000000000000000000000000000000		Notary Publi
My Commission Expires November	30, 2006	