# Master Plumber Code Compliance Bond (To be completed by your surety company.)

		BOND	NO. 037706 662	82667
Tim Servin				of
company Name or, if none, the Principal's name.				
71235 240th St. Dassel, MN. 55325	State	Zip	Telephone No.	-
s principal, and Auto-Owners Insurance Company Surety Company Name				
6101 Anacapri Blvd. Lansing, MI 48917			(517 ) 323-	1:200
rety Company Address	State	Zip	Telephone No.	to the State
corporation licensed to do business in the State of Minnesota, as Surety, f Minnesota, as Obligee, in the sum of TWENTY FIVE THOUSAND I	are jointly ar	(\$25.000) for	the payment of which	, we bind
urselves, our heirs, executors, administrators, successors and assigns firm			(2	345678
			//	
THEREAS a master plumber's ticense has been issued by the Obligee to	he responsib	le master plu	mber of the company	amed
bove; and WHEREAS Minnesota Statutes, section 326.40, subdivision 2 sate.	, requires a b	ond for all pl	umbing work entered	MAR 2001
			00	FILED
OW, THEREFORE, the condition of this obligation is such that, if unde	rsigned Princ	cipal or such	persons authorized to	perform TARY
umbing under the Principal's supervision performs plumbing in complian	nce with the	plumbing cod	es as required pursuar	it to Make
linnesota Rules, Chapter 4715, then this obligation shall be null and void	. otherwice	it chall remain	n in full force and effe	ct for a
exicol not to exceed one year ending December 31st. The period of this b	and in Tan	nary 1st.	. 2004 throu	igh=17076
eccember 31, $2004$ . During the term of this obligation, the Principa	l and Surety	will pay unto		
rected by the Obligee, the amount needed to correct noncomplying plum	bing work, n	ot to exceed	LMENTA LIVE THE	OUSAND
OLLARS (\$25,000) for the benefit of persons injured or suffering finar	icial loss by	reason of fail	are to comply with the	
equirements of the plumbing code, Minnesota Rules, Chapter 4715.				
URTHERMORE, it is understood and agreed that:				
OKTILICATORE, it is understood and agreed that:				
<ul> <li>The aggregate liability of the Surety hereunder pertains to all claims ari. In the event the bond does not provide for correction of all noncomplyi does not relieve the undersigned Principal of liability for correcting not working under said Principal's supervision.</li> <li>This bond is a continuous obligation which may be canceled at any tim fifteen (15) days written notice to the Commissioner of Health. In the from any liability already accrued under this bond, or which shall accruentice period.</li> </ul>	ng plumbing pacomplying pace as to further event of canon	work, the boolumbing wor er liability upon cellation, the S	nd paid by the undersi k by said Principal or on the Surety's giving s Surety shall not be disc	persons at least charged
7th January 2004			Auto-Owners	Insuran
igned and sealed this 7th day of January 2004	iurety Corpo	Talign	1/1/2011	molali
E CONTRACTOR DE LA CONT	y Va	rury	Karren .	o ke c
	Attorney	in Fact Katl	nryn Karlzen Lo	veloy
11m SERVIN 0056638M 1M	neden	-		
int · Master Plumber's Name License No. Master P	lumber's Signs	ature		
III. Manual I state of the stat	1 × 20			
	11- CI			
rint - Principal Name Principa	l's Signatur			
The reverse side of this form must also be completed and the Powe	r Of Attorn	ev attached.		
The hand form must be accompanied by a \$40 fee, payable to the	Ainnesota D	epartment o	f Health. Checks ret	urned for
nonpayment will be charged a \$20 fee (M.S. 604.113, subd. 2).				No. of the second
MINNESOTA Minnesota Department of Health 121 East Seventh Place, Suite220	Offic	. Use Onl	V: Poot 4086	140
P.O. Box 64975		it Date:	12-17	7-03
St. Paul, MN 55164-0975 651/215-0836			109	
DEPARTMENT OF HEALTH MIN Relay Service (Greater MIN) 1/800/627-3529	Depos	1t No .: _	100 mg 1 100	·£ 1—-
MN Relay Service (Metro) 297-5353	-			

# You must complete A or B and C

th.	Acknowledgement of Individual of Partnership Contractor
24	State of Minnesota )
	County of MEEKER )ss.
	On this 3RD day of MARCH, 2004, personally came Tim SERVIN
	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 (SEAL)  CAROL L SERVIN
	MOTARY PUBLIC - MININEROTA
	My commission expires / 13/1 0 8
	Date Date
06	
00-	
В.	Acknowledgement of Corporate Contractor
	State of Minnesota
	County of
	County of
	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.
	no one ability reaged said instrainent to be are not as and about or are corporation.
	/ / (SEAL)
	Notary Public Date
	My commission expires / /
	Date
	그는 전에서 전에 다른 아이들 생각이 되었다면 하는 사람들이 그렇게 되었다면 하는데 하는데 하는데 하는데 하는데 되었다면 하는데 없는데 없었다. 그렇게 되었다면 다른데 없는데 없는데 없는데 없었다면 다른데 없는데 없는데 없는데 없는데 없는데 없는데 없는데 없는데 없는데 없는
_	
C	Acknowledgement of Corporate Surety
٠.	Acknowledgement of Corporate Surety
	State of Minnesota MICHIGAN )ss.
	County of Ingham
	On this 7th day of JANUARY , 2004 , personally came KATHRYN KARLZEN-LOVEJOY
	and Tim SERVIN to me personally known, who being by me duly sworn, did say that he/sh
	is the attorney in fact, of AUTO-OWNERS 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 ATTORNEY-IN-FACT
	acknowledged that he/she executed said instrument as attorney in fact as the free act and deed of said corporation.
	ON1 & MANN 01: 07,2004 (SEAL)
	(SEAL)
	Notary Public JODI L. MASON  O5 20 2007  Notary Public, Ingham County, MI
	My Commission expires / / My Comm. Expires May 20, 2007
	Date
	(1882년 1982년 -

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.

9/2000

#### DATE AND ATTACH TO ORIGINAL BOND

### **AUTO-OWNERS INSURANCE COMPANY**

LANSING, MICHIGAN

NO. 037706 66282667

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN, a Michigan Corporation, having its principal office at Lansing, County of Eaton, State of Michigan, pursuant to the following Resolution adopted by the directors of the said Company on January 27, 1971, to wit:

"RESOLVED, That the President or any Vice President or Secretary or Assistant Secretary of the Company shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity, and other writings obligatory in the nature thereof. Signatures of officers and seal of Company imprinted on such powers of attorney by facsimile shall have same force and effect as if manually affixed. Said officers may at any time remove and revoke the authority of any such appointee."

does hereby constitute and appoint

Fred Hannula, Jim House, Pat Orr, Suzanne K. Sweezey, Brian Harrant, Joseph Mason, Kristina Cassel, Kathryn Karlzen-Lovejoy, Stacy Watkins, Linda Luna, Kathy Risher, Paul Oppenlander, and/or Marion Behrman, Lansing, Michigan

its true and lawful attorney(s)-in-fact, to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof.,

#### without limitations

and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal office.

Fisher, President  ic, came the individual the propally bed and authorized efficer of the Action corporate seal of said company and the day and year first above winter.
ic, came the individue to hie-personally bed and authorized efficer of the ACTO-e corporate seal of said company, and the
bed and authorized of the Actional company and the
. Macon Notary Public
WNERS INSURANCE COMPANY AT
y issued by said Auto cance of said Company, is mat it is a correct and is now in full force and effect.
of the Company a land g,
a

#### DATE AND ATTACH TO ORIGINAL BOND

## **AUTO-OWNERS INSURANCE COMPANY**

LANSING, MICHIGAN POWER OF ATTORNEY

NO. 037706 66282667

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#### without limitations

and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal office.

IN WITNESS WHEREOF, the AUTO-OWNERS INSURANCE COM	IPANY AT LANSING, MICHIG	AN, has caused these pr	resents to be signed and
its corporate seal to be affixed by its authorized officer this	1st day of	June ,	2003
Attest IJ Rudal	John	V Tiher	
T.J. Buda, Jr. Secretary	/\ John	n W. Fisher, Pr	resident
STATE OF MICHIGAN COUNTY OF EATON ss.	U		
On this 1st day of June ,20 known, who executed the preceding instrument and being by me duly sw OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN: that said corporate seal and his signature were duly affixed by the authority and IN WITNESS WHEREOF, I have hereunto set my hand, and affixed my My commission expires May 20 , 2007	worn, said that he is the therein of the seal affixed to said instrument direction of the said Corporation of official seal at the City of Lansin	is the corporate seal of ag, the day and year first	dornicer of the WOTO- said Company, and the
STATE OF MICHIGAN SS. COUNTY OF EATON  T. J. Buda, Jr.		TO-OWNERS INSURA	NCE COMPANY AT
Company of Lansing, Michigan, and that I have compared same with the transcript thereof, and of the whole of the said original, and that the said Po In WITNESS WHEREOF, I have hereunto subscribed my name as Se	and correct copy of Power of A ORIGINAL on file in the Home ower of Attorney has not been revo	ttorney issued by said A Office of said Company oked and is now in full f	Auto-Company insurance and that it's accorrect and effect.
Michigan, this 7th day of January	2004		( Semonto
		J. Buda, Jr.	Secretary
TO THE REST OF THE PROPERTY OF	form of this document it ra	ndare this decument	bigut band unid