

DEPARTMENT OF DEVELOPMENT

City of Upper Arlington
3600 Tremont Road
Upper Arlington, OH 43221

BOND FORM

Type of Bond:

- General Contractor Sewer Builder
 Plumber Driveway/Sidewalk

State of Ohio)
Franklin County) SS:

Bond Certificate Number: _____

KNOW ALL MEN BY THESE PRESENTS:

That _____

as PRINCIPAL, whose place of business (or residence) is located at _____

Phone _____

and _____

as SURETY, are held and firmly bound unto the City of Upper Arlington, State of Ohio, in the sum of FIVE THOUSAND DOLLARS (\$5000.00) to be paid to said City, for the payment whereof well and truly to be made, we jointly and severally bind ourselves respectively and our heirs, executors, and administrators.

THE CONDITION OF THIS BOND IS SUCH, That, Whereas, the said Principal has made application for the aforementioned registration in said City for a period ending December 31, 20_____, in accordance with the terms and conditions set forth in Chapters 717, 723, 729 and 747 of the Codified Ordinances of said City.

NOW, THEREFORE, if said PRINCIPAL, shall well and faithfully perform all his duties as an aforementioned registree during said period, and shall reimburse the City of Upper Arlington, Ohio, for all actual damages caused by any act or omission of said registree, his agents or employees, during said period to any property which this City may own or for which it may be responsible, and shall hold said City of Upper Arlington, Ohio, free and harmless from all claims for damages on account of the negligence or misfeasance of said registree, his expense growing out of the defense of said claims, then his obligation shall be void and of no effect; otherwise to be and remain in full force and effect.

THIS BOND TO BE VALID FROM _____, 20_____, TO December 31, 20_____

WITNESS THE HANDS OF THE PARTIES, this _____ day of _____, 20_____

(Embossed or Validation Seal)

SIGNATURE OF PRINCIPAL: _____
PRINCIPAL'S
EMPLOYING COMPANY: _____

SURETY COMPANY: _____

BY: _____

AGENCY: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

AGENCY TELEPHONE: _____

NOTE: CONTINUATION FORMS/RIDER FORMS ALSO MUST BE EMBOSSED OR HAVE VALIDATION SEAL.