

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
PARTNERSHIP PLUMBING CONTRACTOR
SURETY BOND**

055 - _____

Illinois Plumbing Contractor Registration
Number *(If Renewal, Must Be Completed)*

_____ *Bond Number (Required)*

KNOW ALL PERSONS BY THESE PRESENT, that _____
(Name of Plumbing Contractor as on application)

(Plumbing Contractor Address) City State ZIP Telephone No.

as principal, and _____
Surety Company Name

(Surety Company Address) City State ZIP Telephone No.

a corporation licensed to do business in the state of Illinois, as Surety, are jointly and severally held and firmly bound to the state of Illinois, as Obligee, in the sum of TWENTY THOUSAND DOLLARS (\$20,000) for the payment of which, we bind ourselves, our heirs, executors, administrators, successors and assigns firmly by these presents.

WHEREAS, a registration has been issued by the Obligee to the responsible plumbing contractor named above; and WHEREAS, Illinois Statutes, section 894.20, requires a bond for all plumbing work entered into within the state.

NOW, THEREFORE, the condition of this obligation is such that, if undersigned Principal or such persons authorized to perform plumbing under the Principal's supervision performs plumbing in compliance with the plumbing codes as required pursuant to Illinois Rules, Part 894, then this obligation shall be null and void. Otherwise, it shall remain in full force and effect until its stated expiration date. The period of this bond is _____ through September 30, _____.

During the term of this obligation, the Principal and Surety will pay unto the Obligee, or as otherwise directed by the Obligee, the amount needed to correct noncomplying plumbing work, not to exceed TWENTY THOUSAND DOLLARS (\$20,000) for the benefit of persons injured or suffering financial loss by reason of failure to comply with the requirements of the Illinois Plumbing Code, Illinois Rules, Chapter 894.

FURTHERMORE, it is understood and agreed that:

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 work by said Principal or persons working under said Principal's supervision.
3. This bond is an obligation which may be canceled at any time as to further liability upon the Surety's giving at least 15 days written notice to the Department of Public 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 15 day notice period.

Signed and sealed this _____ day of _____, 20____. Surety Corporation _____

By _____
Original Signature of **Attorney in Fact for Surety Co.**

Print Name of **Plumber of Record**

Original Signature of **Plumber of Record**

Print Name of **Partner**

Original Signature of **Partner**

Notarization of these signatures must be completed (see reverse side of this bond)

**A notary public must use this page to notarize the signatures
of individuals on the front of this bond.**

Everyone must complete both Sections

Notarization of signature on front of bond for Partnership Contractor

State of Illinois)
)Ss.
County of _____)

On this _____ day of _____, 20____, personally came _____

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)

My commission expires: _____/_____/_____
Date

Notarization of signature on front of bond for Surety Company's Attorney in Fact

(If an original Power of Attorney is attached this section is not required to be completed.)

State of Illinois)
)Ss.
County of _____)

On this _____ day of _____, 20____, personally came _____

and _____ to me personally known, who being by me duly

sworn, did say that he/she is the **attorney in fact**, of _____,
the surety corporation whose name is affixed to the foregoing instrument; that the seal affixed to the
foregoing instrument is the corporate seal of the said surety corporation; and that said instrument was
executed in behalf of said surety corporation by authority of its board of directors and said

_____ acknowledged that he/she executed said instrument as **attorney in fact**
as the free act and deed of said surety corporation.

_____/_____/_____
Notary Public Date

(SEAL)

My commission expires: _____/_____/_____
Date