IDAHO DIVISION OF BUILDING SAFETY

1090 E Watertower Street, Suite 150, Meridian, ID 83642

Manufactured Home Retailer License Bond Number _____.
Bond Expiration Date if Non-Continuous Bond _____.

Know all persons by these presents: That we, _____ dba _____, as Principal, and _____, a corporation duly authorized to transact surety business in the State of Idaho are jointly and severally held and firmly bound unto the State of Idaho, Division of Building Safety, to indemnify persons or corporations for loss suffered by reason of any violation of the conditions hereinafter contained.

The amount of the bond is FORTY THOUSAND DOLLARS ($40,000.00). This bond, if non-continuous, may be extended for a further term by the issuance of continuation certification signed by the Surety.

The conditions of this obligation are that:

The Principal shall not practice any fraud, make any fraudulent representation or violate any of the provisions of title 44, chapter 21, Idaho Code, or any of the administrative rules governing Manufactured/Mobile Home Licensing of the Division of Building Safety.

The Surety may terminate this bond by giving thirty (30) days written notice by certified mail to the Division of Building Safety. A copy of the notice of termination shall be sent by certified mail by the Surety to the Principal hereunder.

In case of such cancellation by Surety, no further obligation shall be incurred under this bond after the expiration of said thirty (30) days, but the liability of the Surety shall apply as set out above for any acts or omissions which may have occurred prior to the effective date of such cancellation. The aggregate liability of the Surety shall be limited to the amount of the bond, regardless of the number and amount of claims made thereon.

IN WITNESS WHEREOF, the above-named parties have executed this instrument this ____day of _____, _____ .

PRINCIPAL	**SURETY**
_____	_____
Type or Print Name	Type or Print Name Attorney-In-Fact
_____	_____
Signature	Power of Attorney/Attorney-in-Fact Signature
_____	1661 Edgewater St NW, Suite 200 Salem, OR 97304
Idaho Address	Idaho Address
_____	(866) 722-9239
Idaho Phone Number	Idaho Phone Number

ACKNOWLEDGMENT OF SURETY

(Corporate Officer)

STATE OF _____)
)SS.
COUNTY OF _____)

On this _____day of _____,_____ , before me, a Notary Public in and for said County, personally appeared _____, personally known to me, who being by me duly sworn, did say that (s)he is the duly sworn officer of _____, a corporation duly organized and existing under the laws of the state of _____, that the seal affixed to the foregoing instrument is the corporate seal of said corporation, that the said instrument was signed, sealed, and executed on behalf of said corporation by authority of its Board of Directors, and further acknowledge that said instrument and the execution thereof be the voluntary act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal in the day and the year last above written.

_____

(SEAL)

Notary Public for _____

Residing at _____

My Commission Expires _____

06/04/2007

Surety Solutions, LLC