

This form is to be filled out and executed by the bonding agent

BOND NUMBER _____

CONTRACTOR SURETY BOND FOR CITY OF BRAINERD

KNOW ALL PERSONS BY THESE PRESENTS: That _____ with business office at _____, as principal, and _____ a corporation duly organized under the laws of the State of _____ authorized to do business in the State of Minnesota, as Surety, are hereby held and firmly bound to the City of Brainerd and any person aggrieved by reason of the Principal's failure to faithfully perform the duties, and in all things comply with all laws, ordinances, and rules, pertaining to the Principal's license or any permit applied for and all contracts entered into, the sum of Five Thousand Dollars (\$5,000.00). For the payment of this sum, Principal and Surety bind themselves, their representatives, successors and assigns, jointly and severally by these presents.

WHEREAS, the Principal has made application with the City of Brainerd, to be licensed as a

NOW THEREFORE, the parties further agree that:

1. The purpose of this obligation, which is required by Section 1130 of the Brainerd City Code, is to secure the Principal's faithful performance of the duties, and compliance with all laws, ordinances, and rules, pertaining to the Principal's license or any permit applied for and all contracts entered into.
2. This bond is for the benefit of the City of Brainerd and all persons suffering loss or damages by reason of the Principal's failure to faithfully perform the duties, and in all things comply with all laws, ordinances, and rules, pertaining to the Principal's license or any permit applied for and all contracts entered into.
3. If the Principal shall fail to faithfully perform the duties, and in all things comply with all laws, ordinances, and rules, pertaining to the Principal's license or any permit applied for and all contracts entered into, the City of Brainerd, as well as any person damaged as a result of said failure by the Principal shall, in addition to all other legal remedies, a right of action on this bond in the name of the injured party for loss or damages sustained by the injured party.
4. This bond shall become effective on _____, and shall be continuous until canceled by the Surety. The Surety may cancel this bond any time upon giving the Principal and the City Administrator of the City of Brainerd, thirty (30) days written notice. After cancellation the bond must remain in force for those liabilities incurred by the Principal from the time the bond first became effective until its cancellation,

regardless of when compensation was or may be claimed, awarded or paid. This bond shall not become void upon first recovery but may be sued upon until the full amount shall be exhausted. In no event shall the aggregate liability of the surety on the bond, to any and all persons, exceed the amount of the bond. Immediately upon payment by the Surety of the amount of the bond, the Surety will give written notice to the City Administrator of the City of Brainerd and the Principal that the bond has been exhausted and is, therefore, canceled.

Signed and sealed this _____ day of _____, _____.

(Name of Surety)

(Name of Building Contractor,
Remodeler, or Specialty Contractor.)

By: _____
(Signature of Attorney in Fact)

By: _____
(Signature of President,
Partner, or Sole Proprietor)

Please have signatures acknowledged by a notary.

Surety Solutions, LLC

INSTRUCTIONS

1. To be completed by a notary public for both the Principal and the Surety.
2. Please attach the Power of Attorney for the Surety listed herein.

ACKNOWLEDGMENT OF INDIVIDUAL

STATE OF _____ }
 _____ } ss.
 COUNTY OF _____ }

ACKNOWLEDGMENT OF PRINCIPAL

On this _____ day of _____, _____, before me personally appeared _____, known to me to be the individual whose name is subscribed on this bond form, who acknowledged that this bond was executed for the purposes therein contained.

(Notary Seal) _____
 Notary Public

ACKNOWLEDGMENT OF PARTNERSHIP

STATE OF _____ }
 _____ } ss.
 COUNTY OF _____ }

ACKNOWLEDGMENT OF PRINCIPAL

On this _____ day of _____, _____, before me personally appeared _____, known to me to be the partner in the partnership whose name is subscribed on this bond form, who acknowledged that this bond was executed on behalf of the partnership for the purposes therein contained.

(Notary Seal) _____
 Notary Public

ACKNOWLEDGMENT OF CORPORATION

STATE OF _____ }
 _____ } ss.
 COUNTY OF _____ }

ACKNOWLEDGMENT OF PRINCIPAL

On this _____ day of _____, _____, before me personally appeared _____, who acknowledged that he or she is the _____ of a corporation whose name is subscribed on this bond form, and that, as a corporate officer, he or she is authorized to execute the bond for the purposes therein contained.

(Notary Seal) _____
 Notary Public

ACKNOWLEDGMENT OF SURETY

STATE OF _____ }
 _____ } ss.
 COUNTY OF _____ }

ACKNOWLEDGMENT OF SURETY

On this _____ day of _____, _____, before me personally appeared _____, who acknowledged that he or she is the attorney in fact who is authorized to sign on behalf of (surety company) _____ (state or place of corporation) _____ corporation, on behalf of the corporation.

(Notary Seal) _____
 Notary Public

