

## SOUTHERN HEADQUARTERS 2300 MCLEOD STREET LAS VEGAS, NV 89104 PHONE: 702-668-4546 FAX: 702-668-4567

NORTHERN HEADQUARTERS
2150 FRAZER AVENUE
SPARKS, NV 89431
PHONE: 775-353-3782
FAX 775-353-3798
BOND NO

## **PUBLIC WEIGHMASTER'S BOND**

Know All Men By These Presents:		
That We,		, having a principal place of business at
		, Nevada (hereinafter called the principal), as principal, and
State of Nevada in favor of any re	usiness in the State of No ecipient of Public Weigh of which, well and truly	, a corporation organized under the laws of, evada (hereinafter called the surety), are held and firmly bound to the master's Certificate issued by the licensee in the sum of One Thousand be made, we bind ourselves, our heirs, executors, successors, and assigns,
	a for a license entitling s	that whereas the above names principal has applied to the Department of aid principal to conduct the business of Public Weighmaster in accordance sive Nevada Revised Statutes.
of the Nevada revised Statutes, a	nd also any all future am	d truly comply with the provisions of section 582.010 to 582.180, inclusive, nendments thereto, and bond shall be deemed continuous in form shall d of canceled in the manner hereinafter provided.
	nereunder below the sur	understood and agrees, that nothing herein contained shall be deemed or mof One Thousand Dollars (\$1,000) for the period for which the principal evada.
		bility of the surety heron to any and all persons shall not exceed in the each 12-month period commencing for the date of license issuance.
liability already incurred or accru Nevada thirty (30) days' written r	ed, and may do so upon notice to that effect, and	nall have the right to withdraw as surety form this bond, except as to any giving the said principal and the Department of Agriculture od the State of lat the end of said 30-day period of notice the liability of the surety under orce or effect, except as to any liabilities or indebtedness already incurred
Effective Date;		Principal:
Countersigned by:		Title:
Nevada Registered Agent:		Surety:
City:	Address:	Date:
By Official:		Title: _Attorney in Fact
Subscribed and sworn to before	e me thisday o	f
{Seal}	Not	ary Public: