## SEPTIC TANK PUMPER'S BOND

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KNOW ALL MEN BY THESE PRE	SENTS: That we,	
	of the County of Island, State of Washingto	n,
as Principal, and the		, a
are firmly bound and held unto the Stapersons, their successors and assign wrongful act or default of the Principal Dollars (\$2,000); for which sum, well	business in the state of Washington, as Sure tate of Washington and Island County and to Ins, who may be injured or aggrieved by to I in the penal sum of Two Thousand and NO/1 and truly to be paid, we and each of us bis cutors and administrators, jointly and severa	all the 100 ind
firmly by these presents.		

WHEREAS, the Principal has applied for a Septic Tank Pumper's License in accordance with the rules and regulations of the Island County Board of Health and is required, pursuant to the provisions of said rules and regulations, to furnish a bond in the penal sum of Two Thousand and NO/100 Dollars (\$2,000), conditioned as required by said rules and regulations.

NOW, THEREFORE, the condition of the above obligation is such that if the above bounden Principal, as such Septic Tank Pumper, his agents and employees, in performing work governed by the rules and regulations of the Island County Board of Health which have been, or may hereafter be established, shall faithfully and truly exercise all reasonable care and skill and comply with all of the obligations, terms and conditions of said rules and regulations, and shall well and truly pay, or cause to be paid, any and all judgments, decrees, damages and costs that may be recovered against the Principal by reason of the negligent or improper work, or breach of contract, of the said Principal or any of his agents or employees, or in consequence of any act or omission done by the said Principal or any of his agents or employees, by virtue of his Septic Tank Pumper's License or in the conduct of the said Principal's business as a Septic Tank Pumper, then this obligation shall be null and void and of no effect, otherwise to remain in full force and effect.

PROVIDED, the aggregate liability hereunder for all causes of action arising during the period for which the bond is written shall not exceed the total sum of Two Thousand and NO/100 Dollars, (\$2,000).

PROVIDED FURTHER, that this bond may be cancelled at any time by the Surety by mailing notice to the Island County Board of Health, Courthouse Annex, Coupeville, Washington, 98239, such cancellation to become effective upon the expiration of thirty (30) days after the receipt by the Island County Board of Health of such notice.

	e in full force and effect until December 31,  Il continue for a period of three years following per's License of the Principal.
IN WITNESS WHEREOF, the s	said
(Principal) has hereunto set his han	d and seal and the
	(Surety) has caused this bond to be executed
	ct or agent, and its corporate seal hereto affixed this
day of,	
	(Principal) (Surety)
	, Attorney in Fact
	Surety Address
Approved as to Form:  BY:	