

Bond Number

Registration Number

**State of Ohio  
2017 Registration Bond  
Private Water Systems Contractor**

**Know all men by these presents, that**

Company or Corporation Name

Check one: Whether owned by       individual       partnership       corporation

Of Address

As Principal, and  
Surety Company

Is/are authorized to do business in the State of Ohio, as Surety, are bound to an aggrieved party in the sum of

**ten thousand (\$10,000)**       **twenty thousand (\$20,000)**

to the payment of which is to be made as provided below, the Principal and Surety hereby bind to themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, by these presents.

Bond Effective Date:

Whereas, the above Principal has applied to the Ohio Department of Health for a registration to engage in and practice the business of a private water systems contractor in the State of Ohio as provided in section 3701.344(B)(3) of the Ohio Revised Code (ORC) and rule 3701-28-18 of the Ohio Administrative Code (OAC), such registration **expiring on the 31<sup>st</sup> day of December, 2017.**

NOW, THEREFORE, THE CONDITIONS OF THE ABOVE OBLIGATION IS SUCH, that if the above Principal shall observe strictly and comply faithfully with all laws and rules relating to the construction, alteration, repair or abandonment of private water systems, and any amendments thereto, and shall save and keep harmless the State of Ohio and any person who may be aggrieved by the violation of any of the aforesaid laws or rules from the consequence of any and all acts done by said Principal, then this obligation shall be null and void otherwise to remain in full force and effect until **December 31, 2017.**

**Please note, Company Owner and Bond Company signatures required on the reverse side of this form.**

▶▶ Please see reverse side to complete the form ▶▶

PROVIDED, HOWEVER, that this Bond is executed subject to the following expressed conditions and limitations:

1. The Surety Company may cancel this Bond at any time by giving written notice to the Ohio Department of Health ninety (90) days prior to the effective date of cancellation in accordance with OAC 3701-28-18(D)(2).
2. The aggregate of liability of the Surety Company shall in no event exceed the sum of this Bond, regardless of the number of claims that may be filed hereunder. The sum of  **ten thousand (\$10,000)** or  **twenty thousand dollars (\$20,000)** (*check applicable amount*) for this bond shall be available for payment of violations for the 2017 registration year.
3. This bond shall be for the benefit of any aggrieved party for damages incurred as a result of a violation of OAC Chapter 3701-28, as provided by OAC 3701-28-18(B)(1)(b).

Company Name:

Signature of Company Owner/Representative (required)

Surety Company Name

Surety Company Address

City

State

Zip

Surety Company Telephone

Attorney-in-Fact or Insurance Agent Signature (required)

**(Place Bonding Corporation Seal above)**

**Instructions for preparation:**

1. Impress Seal of Surety Company
2. Attach Power-of-Attorney form for the Attorney-in-fact
3. Make sure the Company Representative signs in the appropriate box