

CITY OF SOUTHFIELD
Department of Building & Safety Engineering

Sign Erector Uniform Surety Bond

Surety Bond Number

Know all men by these presents, that _____

as Principal, business address _____

and _____, as surety, are held and firmly bound unto the City of Southfield, County of Oakland, State of Michigan, in the penal sum of **Five Thousand Dollars (\$5,000.00)** lawful money of the United States of America, to be paid to the City of Southfield, or to its certain Attorney, to which payment well and truly to be made, we and each of us do bind ourselves, our heirs, executors, and administrators, jointly and severally, and every one of them firmly by these presents.

In consideration of this surety, the principal may perform the lawful services by permit or license that are inherent in the occupation of _____ provided that he meets all of the requirements as stated in said resolution or code of the City of Southfield Ordinances, or Building Codes _____, as well as any other conditions that may be required under any present or future ordinances or codes that may be enacted by the City of Southfield.

Now, therefore, the condition of this obligation is such that the said principal shall save harmless and indemnify the City of Southfield from all claims, damages, expenses, suits and proceedings of every kind and nature which may arise by reason of the issuance of said permit and/or license, and shall observe the faithful performance of the terms of said ordinance, code, or permit, then this obligation to be null and void, otherwise to remain in full force and effect. Coverage hereunder shall be effective as of _____, 2 _____, and will expire on _____, 2 _____.

SEALED AND DELIVERED IN THE PRESENCE OF:

Witness to Principal

Signature of Witness

Print/type Name of Witness

Address of Witness

Signature of Principal (Seal if Corporation)

Print/Type name of Principal & Title

Witness to Surety

Signature of Witness

Name of Surety Company

Print/Type Name of Witness

Signature of Attorney-in-Fact

APPROVED AS TO FORM AND EXECUTION

Print/Type Name of Attorney-in-Fact

Date _____ Reg. No. _____

Assistant Corporation Counsel

NOV 2015