



Bloomfield Township
P.O. Box 489, 4200 Telegraph Road
Bloomfield Hills, MI 48303-0489
Phone (248) 433-7715

Inspection Requests: www.bsaonline.com
Website: <http://www.bloomfieldtpw.org>

SURETY BOND

KNOW ALL MEN BY THESE PRESENTS: That we _____
_____ As principal, and _____

As sureties, are held and firmly bound unto the Township of Bloomfield, Oakland County, Michigan, a Municipal Corporation, in the sum of Ten Thousand (\$10,000) Dollars, lawful money of the United States of America, to be paid to said Township of Bloomfield Township, Oakland County, Michigan, or to its certain attorney or assignee, to which payment will and truly to be made, we bind ourselves, our heirs, executors, administrators or assigns, and each and every one of them firmly by these presents.

Sealed with our seals, dated the _____ day of _____, 20__.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT, WHEREAS: the above bonded
_____ has on this _____ day of _____, 20__

Applied to and received a license as Sewer Builder in connection with the installation of public or private sanitary sewer systems in said Township.

Now, therefore, if the said _____ shall honestly and faithfully perform and discharge all the singular obligations and requirements under the Michigan State Plumbing Code, or any amendment thereto, in the manner and time set forth in said Code governing construction of connections to sanitary and storm sewer systems, and also indemnify and hold harmless said Township of Bloomfield, and Township board of said Township of Bloomfield from all claims, damages, suits, and actions of any kind and description, on account of any act, or omission, or negligence of said obligors in carrying out said provisions of said Code whether resulting from the use of improper materials, faulty construction, or failing to properly protect said work, or in properly providing for the safety of their employees, or in any other way and will fully and in each and every particular job, carry out and perform each and every agreement and obligation in said Code, or any amendments thereto, then this obligation to be void, otherwise to remain in full force and effect.

SIGNED, SEALED & DELIVERED in presence of:

Please print names under Signature line

Witness

Insurance Company

Witness

Excavation Company

Expiration Date:

December 31, 20__

Driver's License # _____

Contact Person

Address

Excavator/Company Owner

Signature of Excavation Owner

Telephone Number

(X) _____