



Delaware General Health District

1 and 3 West Winter Street
P.O. Box 570 * Delaware, Ohio 43015 – 0570
(740)368-1700 Fax (740)368-1736
www.delawarehealth.org

Dedicated to Your Health

Frances M. Veverka, MPH
Health Commissioner

LICENSE BOND

KNOW ALL MEN BY THESE PRESENT,

That we _____ as Principal,
and _____ as
Surety, a corporation duly authorized to transact the business of Surety ship in the State of Ohio, are held and firmly bound unto THE BOARD OF HEALTH OF DELAWARE GENERAL HEALTH DISTRICT, OHIO as Obligee, in the penal sum of FIVE THOUSAND AND NO/100 (\$5,000.00) Dollars for the payment of which well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents,

Sealed with our seals this _____ day of _____, _____

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH THAT:

WHEREAS, the above Principal has or is about to apply to said Obligee for a license as PLUMBING CONTRACTOR for the term commencing this date and ending **December 31, 2010**; pursuant to the Rules and Regulations of the Delaware General Health District for the INSTALLATION AND REPAIR of the Plumbing Systems.

NOW THEREFORE, if said principal shall well and truly, comply with and faithfully discharge his duties according to the terms of said Rules and Regulations relating to the issuance of said license, and fully indemnify and save harmless the said Obligee, and any person or persons injured or damaged by the failure of said contractor to comply with the terms of said Rules and Regulations and with the terms of the laws of the State of Ohio; then this obligation shall be void, otherwise to be and remain in full force and effect.

Principal

By:

Surety

By; Attorney-in-Fact

Approved by:
