

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
SOLE PROPRIETOR PLUMBING CONTRACTOR  
SURETY BOND**

\_\_\_\_\_  
Illinois Plumbing Contractor Registration  
Number *(If renewal, must be completed)*

\_\_\_\_\_  
Bond Number *(Required)*

**KNOW ALL PERSONS BY THESE PRESENT, that** \_\_\_\_\_  
(Name of Plumbing Contractor as on application)

\_\_\_\_\_  
(Plumbing Contractor Address)                      City                      State                      ZIP                      Telephone No.  
as principal, and \_\_\_\_\_

\_\_\_\_\_  
Surety Indemnification Company Name

\_\_\_\_\_  
(Surety Indemnification Company Address) City                      State                      ZIP                      Telephone No.

a corporation licensed to do business in the state of Illinois as surety, are jointly and severally held and firmly bound to the director of the Department of Public Health, state of Illinois, as obligee, in the sum of TWENTY THOUSAND DOLLARS (\$20,000) for the payment of which, we bind ourselves, our heirs, executors, administrators, successors and assigns firmly by these presents.

**WHEREAS**, a registration has been issued by the obligee to the irrigation contractor named above; and

**WHEREAS**, Illinois Statutes, section 894.20, requires a bond for all plumbing work.

**NOW, THEREFORE**, the condition of this obligation is such that, if the undersigned Principal or such persons authorized to perform plumbing under the Principal's supervision performs plumbing in compliance with the plumbing codes as required pursuant to Illinois rules, Part 894, then this obligation shall be null and void. Otherwise, it shall remain in full force and effect until its stated expiration date. The period of this bond is \_\_\_\_\_ through September 30, \_\_\_\_\_.

During the term of this obligation, the principal and surety will pay unto the obligee, or as otherwise directed by the obligee, the amount needed to correct noncomplying plumbing work, not to exceed TWENTY THOUSAND DOLLARS (\$20,000) for the benefit of persons injured or suffering financial loss by reason of failure to comply with the requirements of the Illinois Plumbing Code, Illinois Rules, Chapter 894..

PFURTHERMORE, it is understood and agreed that:

1. The aggregate liability of the surety pertains to all claims arising during the period defined above.
2. In the event the bond penalty is insufficient for correction of all noncomplying plumbing work, the exhaustion of the bond does not relieve the undersigned principal of liability for correcting noncomplying work.
3. This bond is an obligation that may be canceled at any time as to further liability upon the surety's giving at least 15 days written notice to the obligee. In the event of cancellation, the surety shall not be discharged from any liability already accrued under this bond, or that shall accrue before the expiration of the 15-day notice period.

**Signed and sealed** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. Surety Corporation \_\_\_\_\_

By \_\_\_\_\_  
Original Signature of **Attorney in Fact for Surety Co.**

\_\_\_\_\_  
Print Name of **Plumber of Record**

\_\_\_\_\_  
Original Signature of **Plumber of Record**

\_\_\_\_\_  
Print Name of **Owner**

\_\_\_\_\_  
Original Signature of **Owner**

**Notarization of these signatures must be completed (see reverse side of this bond)**

**Notarization of Signature for Sole Proprietor Contractor**

*(Both sections must be completed)*

State of Illinois )  
 )Ss.  
County of \_\_\_\_\_)

BEFORE ME, the undersigned authority, on this day personally appeared, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she represents \_\_\_\_\_, a partnership; and said instrument was executed on behalf of the partnership, that he/she acknowledged said instrument to be the free act and deed of the partnership.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Notary Public Date (SEAL)

**Notarization of signature for Surety Company's Attorney in Fact**

*(Not required if an original Power of Attorney is attached)*

State of Illinois )  
 )Ss.  
County of \_\_\_\_\_)

BEFORE ME, the undersigned authority, on this day personally appeared, \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she is the attorney in fact for \_\_\_\_\_, the surety corporation, whose name and seal are affixed to the instrument, and said instrument was executed on behalf of said surety corporation by authority of its board of directors.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Notary Public Date (SEAL)