



Partnership Irrigation Contractor- Lawn Sprinkler Systems Surety Bond

060 - _____
Illinois Irrigation Contractor Registration Number
(If Renewal, Must Be Completed)

_____ *Bond Number (Required)*

KNOW ALL PERSONS BY THESE PRESENT, that _____
(Name of Irrigation Contractor as on application)

(Irrigation 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 Director of the Department of Public Health, State of Illinois, as Obligee, for the benefit of any person injured or suffering financial loss by reason of the Principal's failure to comply with the requirements of the Illinois Lawn Sprinkler System Code (77 Illinois Administrative Code Part 892), 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, Section 320/2.5 of Chapter 225, Illinois Compiled Statutes, requires every irrigation contractor installing lawn sprinkler systems in the state of Illinois to provide to the Obligee a bond guaranteeing that funds shall be available only to the Obligee, and shall be released upon written notification by the Obligee in the same amount for any work on lawn sprinkler systems performed by the Principal.

NOW, THEREFORE, the condition of this obligation is such that, if the Principal shall comply with all provisions of 77 Illinois Administrative Code Part 892 and avoid causing injury or financial loss by reason of failing to comply with such provisions, then this obligation shall be null and void. Otherwise, it shall remain in full force and effect until its stated expiration date. This bond shall run concurrently with the annual registration period beginning _____ and terminating on February 28, 20____.

During the term of this obligation, the Principal and Surety will pay to the Obligee, or as otherwise directed by the Obligee, the amount needed to correct noncomplying irrigation work, not to exceed the amount stated above.

PROVIDED, 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 irrigation work, the exhaustion of the bond does not relieve the undersigned Principal of liability for correcting noncomplying work.
3. This bond is an obligation which 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 which shall accrue before the expiration of the 15 day notice period.

Signed and sealed this ____ day of _____, 20____. **Surety Company** _____
By _____

Original Signature of Attorney in Fact for Surety Company

Print Name of Owner/Officer

Original Signature of Owner/Officer

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



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**A notary public must use this page to notarize the signatures
of individuals on the front of this bond.**

Everyone must complete both Sections

Notarization of signature on front of bond for *Partnership* Irrigation Contractor

State of Illinois)
) SS.
County of _____)

On this ____ day of _____, 20____, personally came _____
to me well known to be the identical person (s) described in and who executed the foregoing bond and he/she/they
acknowledged the same to be his/her/their own free act and deed.

Notary Public Date ____/____/____

(SEAL)

My commission expires: ____/____/____
Date

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

(If an original Power of Attorney is attached this section is not required to be completed.)

State of Illinois)
) SS.
County of _____)

On this ____ day of _____, 20____, personally came _____
to me personally known, who being by my duly sworn, did say that he/she is the **attorney in fact**, of
_____, the surety company whose name is affixed to the foregoing
instrument; that the seal affixed to the foregoing instrument is the corporate seal of the said surety company; and that said
instrument was executed in behalf of said surety company by authority of its board of directors and said
_____ acknowledged that he/she executed said instrument as attorney
in fact as the free act and deed of said surety company.

Notary Public Date ____/____/____

(SEAL)

My commission expires: ____/____/____
Date

Important Notice

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under the Illinois Plumbing Code. Disclosure of this information is mandatory pursuant to 77 IL Admin., Code 892.50. Failure to provide this form may result in suspension, denial or revocation of the Irrigation Contractor Registration. This form has been approved by the Forms Management Center IL 482-0690.