



Bloomfield Township  
 P.O. Box 489 4200 Telegraph Road  
 Bloomfield Hills, MI 48303-0489  
 Phone (248) 433-7715 ■ Fax: 433-7729  
 Inspection Line (248) 594-2818  
**Website: <http://www.bloomfieldtp.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

\_\_\_\_\_  
 Contact Person

Expiration Date:  
**December 31, 20\_\_**  
 Driver's License # \_\_\_\_\_

\_\_\_\_\_  
 Address

Excavator/Company Owner  
 Signature of Excavation Owner

\_\_\_\_\_  
 Telephone Number

(X) \_\_\_\_\_