

RESOLUTION APPROVING SEWER AND WATER BUILDERS LICENSE FOR VARIOUS CONTRACTORS, SEWA

WHEREAS, in accordance with the Ashtabula County Sewer and Water regulations, the following Sewer and Water Builders' License has been presented to the Board for approval, to-wit:

Purpose: Constructing all sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water services thereto in the Ashtabula County Sewer and Water District.

Bond: \$10,000.00

Bond Term: Retroactive to January 1, 2024 thru December 31, 2024

Contractor: Robert E Anchor Plumbing Inc. 2443 Mechanicsville Rd., Rock Creek, Ohio 44084
TJ Smith Excavating LLC, 11230 Hasford Rd., Chardon, Ohio 44024-9640
Kister Construction, PO Box 768, Ashtabula, Ohio 44005
Simak Trucking & Excavating, Inc., PO Box 599, North Kingsville, Ohio 44068
Union Industrial Contractors, PO Box 1718, Ashtabula Ohio 44005-1718
Star Excavating Inc., 5818 North Ridge Rd., Madison, Ohio 44057
C.I.R. Incorporated, 2856 N County Line Rd., Geneva, Ohio 44041
Koski Construction, PO Box 1038, Ashtabula, Ohio 44005-1038

NOW THEREFORE BE IT RESOLVED, by the Board of Commissioners of Ashtabula County, Ohio that the Sewer and Water Builders License, as noted above, is approved in accordance with copies now on file in this office.

**ASHTABULA COUNTY COMMISSIONERS
CERTIFICATION PAGE**

Resolution No. 2024-50

January 09, 2024

**RESOLUTION APPROVING SEWER AND WATER BUILDERS LICENSE FOR
VARIOUS CONTRACTORS, SEWA**

Upon the motion of Casey R. Kozlowski, seconded by J.P. Ducro IV.

VOTE:

Kathryn L. Whittington

Aye

J.P. Ducro IV

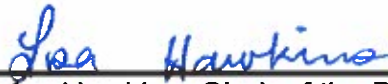
Aye

Casey R. Kozlowski

Aye

CERTIFICATE OF CLERK

IT IS HEREBY CERTIFIED that the foregoing is a true and correct transcript of a resolution acted upon and duly passed by the Board of County Commissioners of Ashtabula County, Ohio, on the date noted above.



Lisa Hawkins, Clerk of the Board
Board of County Commissioners
Ashtabula County, Ohio



Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

I, Robert E. Anchor am authorized to execute on behalf of Robert E. Anchor Plumbing INC.

the renewal of the Water and Sewer Builder's License number 2023-30, originating with Ashtabula County on 4/5/2023. My signature verifies that there have been no changes made to the original license. I understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the *Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code*. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for Robert E. Anchor Plumbing INC. company, until December 31, 2024.

Sworn to and subscribed in my presence this 14 day of November, 2023, City of Rock Creek, County of Ashtabula, State of Ohio.

Melinda S Powell

Melinda S Powell
NOTARY PUBLIC
in and for the State of Ohio
Recorded in Lake County
My Commission Expires 12/18/2023

SEAL

Notary Public My Commission Expires:

[Signature] 12-12-23
Ashtabula Co. Sanitary Engineer / Date

[Signature] 12-20-23
Ashtabula Co. Prosecuting Attorney / Date

Ashtabula Co. Commissioner _____ Date _____

Ashtabula Co. Commissioner _____ Date _____


Ashtabula Co. Commissioner _____ Date _____

Signature:

Robert E Anchor

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Robert E. Anchor, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

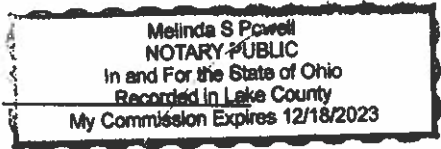
SIGNATURE OF APPLICANT 
TITLE owner
COMPANY NAME Robert E. Anchor Plumbing INC.

Sworn to and subscribed in my presence this 20th day of November,
2023, City of Rock Creek, County of Ashtabula,
State of Ohio.


Notary Public

SEAL

My Commission Expires:



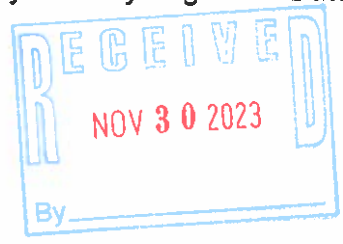
Commissioner / Date

 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

 12-12-23
Ashtabula County Sanitary Engineer / Date

Commissioner / Date



Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT

I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 et seq. It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

Robert E Anchor

Company Name (please print)

Robert E. Anchor

President Name (please print)

Robert E Anchor

President's Signature

Sworn to and subscribed before me, a notary public, this 26 day of
November, 2023 at the City of Rock Creek,
County of Ashtabula, and State of Ohio.

SEAL

Melinda S Powell

Notary Public

My Commission Expires:

Melinda S Powell
NOTARY PUBLIC
In and For the State of Ohio
Recorded in Lake County
My Commission Expires 12/18/2023

Ashtabula County
Dept. of Environmental
Services 2024 Sewer &
Water Builder's License

BOND

BND 0152471

KNOWN ALL MEN BY THESE PRESENTS:

That I/We Robert E. Anchor Plumbing, Inc., as Principal and Westfield Insurance Company as Surety, are held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars (\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for which payment well and truly made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents, for a term beginning on 01/01/2024 and ending on December 31 of same year.

WHEREAS, said Robert E. Anchor Plumbing, Inc. Principal, has this day been granted a sewer and water builder's license by the County Commissioners of Ashtabula in accordance with the provisions of a Resolution Vol. _____, Page _____, Ashtabula County Commissioners Journal, and under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

NOW, THEREFORE, the condition of this obligation is such that if the said Robert E. Anchor Plumbing, Inc. shall at all times hereafter as sewer and water builder under said license, well and truly perform and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto, and shall save said County harmless from all damages that may arise from his negligence, or the negligence of anyone in his employ, including the failure to fully restore property in kind, and shall conform to and abide by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37 and such other requirements as said County may make in relation to plumbing and to the direction of the Sanitary Engineer for said County, then this obligation is to be void otherwise to remain in full force and effect.

Signed, sealed and dated this 10th day of November, year 2023.



SEAL

Robert E. Anchor Plumbing, Inc.
Robert E. Anchor
Principal
Westfield Insurance Company
Dina Coates
Surety Dina Coates, Attorney-in-Fact

Board of Ashtabula County Commissioners
Ashtabula County, Ohio

Commissioner

Commissioner

Commissioner

Approved as to Legal Form:

Cheryl A. Trotter for CM O'Toole 12-20-23
Ashtabula County Prosecuting Attorney

Approved:

Shawn Aiken 12-2-23
Shawn Aiken, P.E.
Ashtabula County Sanitary Engineer

POWER NO: 34-0429
Power of Attorney

Westfield Insurance Company

CERTIFIED COPY

1 Park Circle, PO Box 5001, Westfield Center, Ohio 44251-5001

Know All Men by These Presents, That **Westfield Insurance Company**, a corporation, hereinafter referred to individually as a "Company" duly organized and existing under the laws of the State of Ohio, and having their principal offices in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint **Dina Coates** of **Jefferson** and State of **OH** its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in their name, place and stead, to execute, acknowledge and deliver

Bond Number **BND 0152471**
Principal Name: **Robert E. Anchor Plumbing, Inc.**
Obligee Name: **Ashtabula County**
Bond Penalty: \$ **10,000.00**

and to bind the Company thereby as fully and to the same extent as if such bond was signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of the **Westfield Insurance Company**

"**BE IT RESOLVED**, that the President, any Senior Executive, any Secretary or any Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents cancelling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon The Company as if signed by the President and sealed and attested by the Corporate Secretary."

"**BE IT FURTHER RESOLVED**, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached" (Each adopted at a meeting held on February 8, 2000.)

In Witness Whereof, **Westfield Insurance Company** has caused these presents to be signed by their **Senior Executive** and their corporate seal to be hereto affixed this **17th** day of **December 2019**.


By: **Gary W. Stumper, National Surety Leader and Senior Executive**



State of Ohio
County of Medina ss.

CERTIFICATE

I, **Frank Carrino**, Secretary of the **Westfield Insurance Company** do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Company, which is still in full force and effect, and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Company at Westfield Center, Ohio, this **10th** day of **November**, A.D., **2023**.



By: **Frank Carrino, Secretary**

On this **17th** day of **December**, A.D., **2019**, before me personally came **Gary W. Stumper**, to me known, who, being by me duly sworn, did depose and say, that he resides in **Hartford, CT**, that he is **National Surety Leader and Senior Executive** of **Westfield Insurance Company** the company described in and which executed the above instrument; that he knows the seal of said Company, that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said Company; and that he signed his name thereto by like order.

Notarial Seal
Affixed



State of Ohio
County of Medina ss.


By: **David A. Kotnik, Attorney at Law, Notary Public**
My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

RECEIPT DATE 11.30.23 No. 395597

RECEIVED FROM Robert E. Anchor Plumbing \$ 50.00

2024 Water & Sewer License DOLLARS

FOR RENT
 FOR 1/2 Water & 1/2 Sewer

ACCOUNT		<input type="radio"/> CASH	FROM _____ TO _____
PAYMENT	<u>21996</u>	<input checked="" type="radio"/> CHECK	
BAL. DUE	<u>21996</u>	<input type="radio"/> MONEY ORDER	BY <u>MH</u>
		<input type="radio"/> CREDIT CARD	

3-11

21996



Robert E. Anchor Plumbing INC
2443 Mechanicsville Rd.
Rock Creek, Ohio 44084
(440) 474-9354

Andover Bank
ANDOVER.BANK
56-871/412



11/14/2023

PAY TO THE ORDER OF Ashtabula County Dept. Environmental Servi

\$ ****50.00**

Fifty and 00/100*****

DOLLARS

Ashtabula County Dept. Environmental Servi
PO Box 520
Jefferson, OH 44047

Robert E. Anchor
AUTHORIZED SIGNATURE

MEMO

⑈021996⑈ ⑆041208719⑆0000000107123⑈

FD Security features. Details on back.



Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

I, Steven J Klima am authorized to execute on behalf of C.I.R., Incorporated, the renewal of ~~the~~ Water and Sewer Builder's License number 2023-08, originating with Ashtabula County on 01/17/2023. My signature verifies that there have been no changes made to the original license. I understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance, affidavit form for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for C.I.R., Incorporated company, until December 31, 2024.

President/Owner signature *Steven J Klima* Phone number 440.466.0432
Steven J Klima

Sworn to and subscribed in my presence this 7th day of December, 2023, City of Geneva, County of Ashtabula, State of Ohio.

Suzanne R. Latin
Notary Public My Commission Expires: 3/21/2025

SUZANNE R. LATIN
NOTARY PUBLIC • STATE OF OHIO
Recorded in Lake County
My commission expires Mar. 21, 2025

SEAL

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

Suph 12-12-23
Ashtabula Co. Sanitary Engineer / Date

Chap R Fortunato for CMO Toole
Ashtabula Co. Prosecuting Attorney / Date
12-20-23

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT**

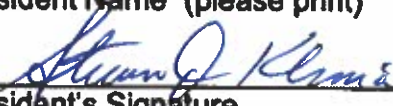
I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

C.I.R., Incorporated

Company Name (please print)

Steven J Klima

President Name (please print)



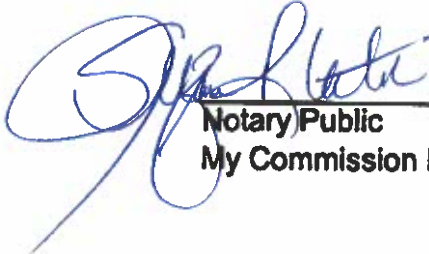
President's Signature

Sworn to and subscribed before me, a notary public, this 7th day of

December, 2023 at the City of Geneva,

County of Ashtabula, and State of Ohio.

SEAL



SUZANNE R. LATIN
NOTARY PUBLIC • STATE OF OHIO
Recorded in Lake County

My commission expires Mar. 21, 2025

Notary Public

My Commission Expires: 3/21/2025

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Steven J Klima , being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT

Steven J Klima

TITLE

Steven J Klima, President

COMPANY NAME

C.I.R., Incorporated

Sworn to and subscribed in my presence this 7th day of December,
2023, City of Geneva, County of Ashtabula,
State of Ohio.

SEAL

Suzanne R. Latin
Notary Public

SUZANNE R. LATIN
NOTARY PUBLIC • STATE OF OHIO
Recorded in Lake County

My Commission Expires: My commission expires Mar. 21, 2025

Commissioner / Date

Christine R. Tarkenton for CMO Taylor 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

Commissioner / Date

David L. ... 12-12-23
Ashtabula County Sanitary Engineer / Date

****Please use this BOND FORM provided- Continuation forms will NOT be accepted.**

B6749189

Ashtabula County Dept. of Environmental Services 2023 Sewer & Water Builder's License BOND

KNOWN ALL MEN BY THESE PRESENTS:

That I/we CIR Incorporated, as Principal and The Cincinnati Insurance Company as Surety, are held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars (\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for which payment well and truly made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents, for a term that begins on January 1, 2024 and ends on December 31 of the same year.

CIR Incorporated

WHEREAS, said _____ Principal, has this day been granted a sewer and water builder's license by the County Commissioners of Ashtabula in accordance with the provisions of a Resolution Ashtabula County Commissioners Journal, and under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

CIR Incorporated

NOW, THEREFORE, the condition of this obligation is such that if the said _____ Principal, shall at all times hereafter as sewer and water builder under said license, well and truly perform and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto, and shall save said County harmless from all damages that may arise from his negligence, or the negligence of anyone in his employment, including the failure to fully restore property in kind, and shall conform to and abide

by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37 and such other requirements as said County may make in relation to plumbing and to the direction of the Sanitary Engineer for said County, then this obligation is to be void otherwise to remain in full force and effect.

Signed, sealed and dated this 7th day of December, 2023 year

C.I.R., Incorporated
Steven J Klima
Principal Steven J Klima, President



Noel Ellis
Surety Noel Ellis

Board of Ashtabula County Commissioners

Commissioner / Date

Commissioner / Date

Commissioner / Date

Approved as to Legal Form: Ashtabula County, Ohio
Cheryl R. ... for CMO's Title 12-20-23
Ashtabula County Prosecuting Attorney / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date

THE
CINCINNATI
INSURANCE COMPANY

CONTINUATION CERTIFICATE

Bond Number: B6749189
Bond Amount: \$ 10,000.00

Principal:

CIR Incorporated
2856 N County Line Rd
Geneva, OH 44041-9604

Obligee:

County of Ashtabula
25 W Jefferson St
Jefferson, OH 44047

It is expressly understood and agreed that the subject bond and all renewal or continuation certificates attached thereto (including this one) are not cumulative, and that the total liability of THE CINCINNATI INSURANCE COMPANY under the attached bond and all such renewal or continuation certificates shall not exceed the penalty named in the subject bond.

This bond is extended to 12/31/2024

Signed and sealed this 12/7/2023



THE CINCINNATI INSURANCE COMPANY

Noel Ellis

ATTORNEY-IN-FACT Noel Ellis

Agency:

Risk Strategies Company
34056
8339 Tyler Blvd
Mentor, OH 44060-4220

BN-1003(3/97)

THE CINCINNATI INSURANCE COMPANY
THE CINCINNATI CASUALTY COMPANY

Fairfield, Ohio

B6749189

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY and THE CINCINNATI CASUALTY COMPANY, corporations organized under the laws of the State of Ohio, and having their principal offices in the City of Fairfield, Ohio (herein collectively called the "Companies"), do hereby constitute and appoint

Noel Ellis

of **Fairfield OH**
their true and legal Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign, execute, seal and deliver on behalf of the Companies as Surety, any and all bonds, policies, undertakings or other like instruments, as follows:

Ten Thousand Dollars \$ 10,000.00

This appointment is made under and by authority of the following resolutions adopted by the Boards of Directors of The Cincinnati Insurance Company and The Cincinnati Casualty Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the President or any Senior Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate seal; and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company.

RESOLVED, that the signature of the President or any Senior Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Vice-President and the Seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS WHEREOF, the Companies have caused these presents to be sealed with their corporate seals, duly attested by their President or any Senior Vice President this 16th day of March, 2021.



STATE OF OHIO)SS:
COUNTY OF BUTLER)

THE CINCINNATI INSURANCE COMPANY
THE CINCINNATI CASUALTY COMPANY

Stephen A. Justice

On this 16th day of March, 2021 before me came the above-named President or Senior Vice President of The Cincinnati Insurance Company and The Cincinnati Casualty Company, to me personally known to be the officer described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of said Companies and the corporate seals and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporations.



Keith Collett

Keith Collett, Attorney at Law
Notary Public - State of Ohio
My commission has no expiration date.
Section 147.03 O.R.C.

I, the undersigned Secretary or Assistant Vice-President of The Cincinnati Insurance Company and The Cincinnati Casualty Company, hereby certify that the above is the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Power of Attorney is still in full force and effect.

Given under my hand and seal of said Companies at Fairfield, Ohio, this 7th day of December, 2023



Ed [Signature]



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/25/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Zito Insurance Agency a Division of Risk Strategies 8339 Tyler Blvd. Mentor OH 44060	CONTACT NAME: Marti Lugli		
	PHONE (A/C No. Ext): 440-205-7400	FAX (A/C No.): 440-205-7410	
E-MAIL ADDRESS: mlugli@risk-strategies.com			
INSURER(S) AFFORDING COVERAGE		NAIC #	
INSURED CIR Inc 2856 N County Line Rd Geneva OH 44041	INSURER A: CINCINNATI INSURANCE COMPANY*		10677
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER: 7007396

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> X.C. U Included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		EPP 0386679	5/31/2022	5/31/2025	EACH OCCURRENCE \$ 500,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			EBA 0386679	5/31/2022	5/31/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			EPP 0386679	5/31/2022	5/31/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	EPP 0386679	5/31/2022	5/31/2025	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ 100,000
A	<input checked="" type="checkbox"/> Leased/Rented Equipment			EPP 0386679	5/31/2022	5/31/2025	Leased/Rented Equip Deductible \$100,000 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Insurance Company will notify Certificate Holder 30 Days Advance Notice of Cancellation/10 Days Advance Notice for Non-Payment of Premium.

CERTIFICATE HOLDER**CANCELLATION**

Ashtabula County Dept. of Environmental Services
 36 W Walnut St
 Jefferson OH 44047

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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RECEIPT DATE 12.13.23 No. 449707

RECEIVED FROM CIR Inc. \$ 50.00

2024 Water & Sewer License DOLLARS

FOR RENT FOR 1/2 Water & 1/2 Sewer

ACCOUNT		<input type="radio"/> CASH	FROM _____ TO _____
PAYMENT	<u>10561</u>	<input checked="" type="radio"/> CHECK	
BAL DUE		<input type="radio"/> MONEY ORDER	BY <u>MH</u>
		<input type="radio"/> CREDIT CARD	

3-11

C I R INCORPORATED
GENERAL CONTRACTOR
2856 N COUNTY LINE ROAD
GENEVA, OH 44041
440-466-0432

10561
68-871/412

DATE December 7, 2023

PAY TO THE ORDER OF Ashtabula County Department of Environmental Services ***** \$ *** 50.00

INCORPORATED 50 DOLLARS DOLLARS



ANDOVER BANK

FOR Annual License Renewal

[Handwritten Signature]

⑈010561⑈ ⑆041208719⑆ 1007030253⑈



Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

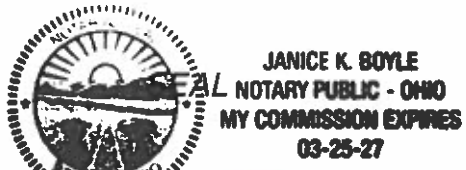
I, Kenneth A. Kister am authorized to execute on behalf of Kister Construction, the renewal of the Water and Sewer Builder's License number 2023-05, originating with Ashtabula County on 01/17/23. My signature verifies that there have been no changes made to the original license. I understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance, affidavit form for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for Kister Construction Inc. company, until December 31, 2024.

President/Owner signature [Signature] Phone number 440-997-5676

Sworn to and subscribed in my presence this 16 day of November, 20 23, City of Ashtabula, County of Ashtabula, State of Ohio.

[Signature: Janice K. Boyle]
Notary Public My Commission Expires: 3-25-27



[Signature] 12-12-23
Ashtabula Co. Sanitary Engineer / Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

[Signature] 12-20-23
Ashtabula Co. Prosecuting Attorney / Date

Ashtabula Co. Commissioner Date

2024

APPLICATION FOR SEWER AND WATER BUILDER'S LICENSE

Ashtabula County Department of Environmental Services

Date: 11/16/2023

The undersigned does hereby apply to the Ashtabula County Board of Commissioners for a SEWER AND WATER BUILDER'S LICENSE for the purpose of constructing all sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water services thereto in the Ashtabula County Sewer and Water District in accordance with the regulations and specifications of the Ashtabula County Department of Environmental Services. Failure of the sewer and water builder to answer any of the following questions, comply with any rules and regulations, or the direct orders of the Sanitary Engineer, his duly authorized assistants or inspectors shall be deemed just cause for the non-issuance and/or revocation of the Sewer and Water Builder's License. Falsification of this form, or any negligence under licensure, may result in legal action in accordance with Sections 6117 and 6103 of the Ohio Revised Code.

1. Business Name Kister Construction Co. Inc.
2. Owner's Name Kenneth A. Kister
3. Business Address 2559 South Ridge East
Ashtabula OH 44004
4. Home Address P.O. Box 768
Ashtabula OH 44005

5. Primary Telephone Number 440-997-5676
6. Email kcinc@windstream.net (for correspondence only)
7. Employer Tax Identification Number 34-1828013
8. Number of years licensed by Ashtabula County Sanitary Engineer 21

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION FORM**

9. Years of experience constructing sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water line services.
41 years
10. Percentage of work pertinent to construction of sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water line services. 1 %

11. Cities, Villages or Townships in which Applicant has performed work during the past two (2) years and the official, preferably an engineer, having personal knowledge of the Applicant's workmanship and character.

AREA	PERSON	OFFICIAL CAPACITY	PHONE	TYPE OF WORK PERFORMED
Ashtabula	Bill Jepson	City of Ashtabula	440-997-7103	Construction

12. Equipment owned or leased by Applicant for the construction of sewers and water lines.

TYPE OF EQUIPMENT (MAKE & MODEL)	LEASED/OWNED (L or O)		
Backhoes	O		
front end loaders	O		
other necessary equipment	O		

Names of Applicant's employees normally utilized as pipe layers and level of experience of each. Attach additional sheets if necessary.

NAME	YEARS OF EXPERIENCE
Kenneth A. Kister	29
Ronald R. Kister Jr.	40

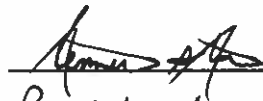
As the Applicant, by signing below I acknowledge and, and agree to comply with the specifications and standards listed in the Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System Code.

SIGNATURE



**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**


Kenneth A. Kister, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT 
TITLE President
COMPANY NAME Kister Construction Co. Inc.


Sworn to and subscribed in my presence this 16 day of November,
2023, City of Ashtabula, County of Ashtabula,
State of Ohio.



JANICE K. BOYLE
NOTARY PUBLIC - OHIO
SEAL COMMISSION EXPIRES
03-25-27


Notary Public
My Commission Expires: 3-25-27

Commissioner / Date

 12-20-23
Ashtabula County Prosecuting Attorney / Date
for CMO Tools

Commissioner / Date

 12-12-23
Ashtabula County Sanitary Engineer / Date

Commissioner / Date

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT**

I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

Kister Construction Co. Inc
Company Name (please print)

Kenneth A. Kister
President Name (please print)


President's Signature

Sworn to and subscribed before me, a notary public, this 16 day of
November, 2023 at the City of Ashtabula,
County of Ashtabula, and State of Ohio.



SEAL
JANICE K. BOYLE
NOTARY PUBLIC - OHIO
MY COMMISSION EXPIRES
03-25-27


Notary Public
My Commission Expires: 3-25-27

Ashtabula County
Dept. of Environmental
Services 2024 Sewer &
Water Builder's License

BOND

BND 0165185

KNOWN ALL MEN BY THESE PRESENTS:

That I/We Kister Construction Company Inc., as Principal and Westfield Insurance Company as Surety, are held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars (\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for which payment well and truly made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents, for a term beginning on 01/01/2024 and ending on December 31 of same year.

WHEREAS, said Kister Construction Company Inc. Principal, has this day been granted a sewer and water builder's license by the County Commissioners of Ashtabula in accordance with the provisions of a Resolution Vol. _____, Page _____, Ashtabula County Commissioners Journal, and under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

NOW, THEREFORE, the condition of this obligation is such that if the said Kister Construction Company Inc. shall at all times hereafter as sewer and water builder under said license, well and truly perform and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto, and shall save said County harmless from all damages that may arise from his negligence, or the negligence of anyone in his employ, including the failure to fully restore property in kind, and shall conform to and abide by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37 and such other requirements as said County may make in relation to plumbing and to the direction of the Sanitary Engineer for said County, then this obligation is to be void otherwise to remain in full force and effect.

Signed, sealed and dated this 3rd day of October, year 2023.

Kister Construction Company Inc.



SEAL

Principal

Westfield Insurance Company

Surety Diane Gibson
Diane Gibson, Attorney-in-Fact

Board of Ashtabula County Commissioners
Ashtabula County, Ohio

Approved as to Legal Form:

Commissioner

Cheryl R. Fortin for CMO, Torle 12-20-22
Ashtabula County Prosecuting Attorney

Commissioner

Approved:
Shawn Aiken 12-12-23
Shawn Aiken, P.E.
Ashtabula County Sanitary Engineer

Commissioner

CERTIFIED COPY

1 Park Circle, PO Box 5001, Westfield Center, Ohio 44251-5001

Know All Men by These Presents, That **Westfield Insurance Company**, a corporation, hereinafter referred to individually as a "Company" duly organized and existing under the laws of the State of Ohio, and having their principal offices in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint of **Westfield Center** and State of **OH** its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in their name, place and stead, to execute, acknowledge and deliver

Bond Number: **BND 0165185**
Principal Name: **Kister Construction Company Inc.**
Obligee Name: **Ashtabula County**
Bond Penalty: \$ **10,000.00**

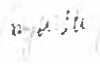
and to bind the Company thereby as fully and to the same extent as if such bond was signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of the **Westfield Insurance Company**

"**BE IT RESOLVED**, that the President, any Senior Executive, any Secretary or any Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents cancelling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon The Company as if signed by the President and sealed and attested by the Corporate Secretary."

"**BE IT FURTHER RESOLVED**, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000.)

In Witness Whereof, **Westfield Insurance Company** has caused these presents to be signed by their **Senior Executive** and their corporate seal to be hereto affixed this **17th** day of **December 2019**.


By: **Gary W. Stumper, National Surety Leader and Senior Executive**

Affixed Corporate Seal



CERTIFICATE

I, **Frank Carrino**, Secretary of the **Westfield Insurance Company** do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Company, which is still in full force and effect, and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Company at Westfield Center, Ohio, this **3rd** day of **October**, A.D. **2023**.



By: **Frank Carrino, Secretary**

State of Ohio
County of Medina ss

On this **17th** day of **December**, A.D., **2019**, before me personally came **Gary W. Stumper**, to me known, who, being by me duly sworn, did depose and say, that he resides in **Hartford, CT**, that he is **National Surety Leader and Senior Executive** of **Westfield Insurance Company** the company described in and which executed the above instrument, that he knows the seal of said Company; that the seal affixed to said instrument is such corporate seal, that it was so affixed by order of the Board of Directors of said Company, and that he signed his name thereto by like order.

Notarial Seal Affixed




By: **David A. Kotnik, Attorney at Law, Notary Public**
My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

State of Ohio
County of Medina ss

RECEIPT

DATE 12.8.23No. 449702RECEIVED FROM Kister Construction\$ 50.002024 Smith Excavating LLC

DOLLARS

 FOR RENT
 FOR 1/2 water & 1/2 sewer

ACCOUNT	
PAYMENT	<u>11377</u>
BAL DUE	

 CASH CHECK MONEY ORDER CREDIT CARD

FROM _____ TO _____

BY MH

3-11

CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

Kister Construction Co Inc
 Po Box 768
 Ashtabula, OH 44005
 440-997-5676

CNB Bank
 Ashtabula, OH 44004
 60-6277313

11377

12/4/2023

PAY TO THE ORDER OF Ash. Co. Dept. of Environmental Services\$ 50.00Fifty and 00/100*****

DOLLARS

PROTECTED AGAINST FRAUD

Ash. Co. Dept. of Environmental Services



MEMO

James Boyle

⑈011377⑈ ⑆031306278⑆ 1307783860⑈

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Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

I, Sarah Koski-Noufer am authorized to execute on behalf of KOSKI CONSTRUCTION

the renewal of the Water and Sewer Builder's License number 2023-01, originating with Ashtabula County on 12-30-22. My signature verifies that there have been no changes made to the original license. I

understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance, affidavit form for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the

Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for KOSKI CONSTRUCTION company, until December 31, 2024.

Vice President/Owner signature Sarah Koski-Noufer Phone number 440-997-5337

Sworn to and subscribed in my presence this 30 day of November 20 23, City of Ashtabula, County of Ashtabula, State of Ohio.

Mary H. Kiehl
MAY H. KIEHL
NOTARY PUBLIC • STATE OF OHIO
Notary Public My Commission Expires Recorded in Ashtabula County
My commission expires June 11, 2028

SEAL

[Signature] 12-13-23
Ashtabula Co. Sanitary Engineer / Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

Cheryl A. [Signature] for C.M.O. Torle 12-20-23
Ashtabula Co. Prosecuting Attorney / Date

Ashtabula Co. Commissioner Date

Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT

I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

KOSKI CONSTRUCTION
Company Name (please print)

Vice Sarah Koski-Boyer
President Name (please print)

Vice Sarah Koski-Boyer
President's Signature

Sworn to and subscribed before me, a notary public, this 30 day of
November, 2023 at the City of Ashtabula,
County of Ashtabula, and State of Ohio.

SEAL

Mary H. Kiehl
Notary Public

My Commission Expires: MARY H. KIEHL
NOTARY PUBLIC • STATE OF OHIO
Recorded in Ashtabula County
My commission expires June 11, 2028

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Sarah Koski-Noufer, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT Sarah Koski-Noufer
TITLE Vice President
COMPANY NAME KOSKI CONSTRUCTION Co

Sworn to and subscribed in my presence this 30 day of November,
2023, City of Ashtabula, County of Ashtabula,
State of Ohio.



SEAL

Mary H. Kiehl
Notary Public

MARY H. KIEHL
NOTARY PUBLIC • STATE OF OHIO
My Commission Expires Recorded in Ashtabula County
My commission expires June 11, 2028

Commissioner / Date

Christopher R. Statuta for CMO Toole 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

Commissioner / Date

[Signature] 12-13-23
Ashtabula County Sanitary Engineer / Date

**2022 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Sarah Koski-Nuber, being first duly sworn, says that he is the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT

Sarah Koski-Nuber

TITLE

Vice President

COMPANY NAME

KOSKI CONSTRUCTION Co

Sworn to and subscribed in my presence this 10 day of December,
2021, City of Ashtabula, County of Ashtabula,
State of Ohio.

Mary H. Kiehl
Notary Public

SEAL

MARY H. KIEHL
NOTARY PUBLIC - STATE OF OHIO
My Commission Expires: Recorded in Ashtabula County
My commission expires June 11, 2023

Application Approved:

[Signature]

Ashtabula Co. Sanitary Engineer

Date: 12-13-23

Ashtabula Co. Commissioner

Date: _____

Ashtabula Co. Commissioner

Date: _____

Chris [Signature] for CMO/Torle
Ashtabula Co. Prosecuting Attorney

12-20-23

Ashtabula Co. Commissioner

Date: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/30/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AssuredPartners of Ohio LLC, Richfield 3900 Kinross Lakes Parkway #300 Richfield OH 44286	CONTACT NAME: Amanda Browne	
	PHONE (A/C, No, Ext): 440-895-6541	FAX (A/C, No): 440-356-2126
E-MAIL ADDRESS: amanda.browne@assuredpartners.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Cincinnati Insurance Company		10677
INSURER B: Westchester Surplus Lines Insurance Co		10172
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
 The Koski Construction Company
 5841 Woodman Avenue
 PO Box 1038
 Ashtabula OH 44004

License#: 954553
 KOSKCON-02

COVERAGES

CERTIFICATE NUMBER: 896111566

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> 1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			EPP0391220	6/22/2023	6/22/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			EPP0391220	6/22/2023	6/22/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			EPP0391220	6/22/2023	6/22/2024	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$ 5,000,000
								\$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	EPP0391220	6/22/2023	6/22/2024	PER STATUTE <input checked="" type="checkbox"/> OTH-ER	Ohio Stop Gap
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A B	Leased/Rented Eqpt Pollution Liability			EPP0391220 G28328096	6/22/2023 6/19/2023	6/22/2024 6/19/2024	max limit per occ & agg	600,000 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The following Provisions apply when required by written contract:

Additional Insured-

General Liability: Managers or Lessors of Premises; Lessor of Leased Equipment; State or Government Agencies; Mortgagee, Assignee or Receivers; License and Permits- Form GA233

Owners, Lessees or Contractors - Ongoing and Completed Operations- Form GA472

Auto Liability- Form AA288

Umbrella follows the underlying forms

See Attached...

CERTIFICATE HOLDER**CANCELLATION**

Ashtabula County Department of Environmental Services
 (ACDES)
 P.O. Box 520
 Jefferson OH 44047
 USA

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Amanda Browne

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ADDITIONAL REMARKS SCHEDULE

AGENCY AssuredPartners of Ohio LLC, Richfield		NAMED INSURED The Koski Construction Company 5841 Woodman Avenue PO Box 1038 Ashtabula OH 44004	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE**

Primary/Non-Contributory-
General Liability: Managers or Lessors of Premises; Lessor of Leased Equipment; State or Government Agencies; Mortgagee, Assignee or Receivers; License and Permits- Form GA233; Owners, Lessees or Contractors - Ongoing and Completed Operations- Form GA472
Auto Liability- Form AA288

Waiver of Subrogation-
General Liability- Form GA233
Auto Liability- Form AA288
Umbrella follows the underlying forms

RE: Ashtabula County Sewer and Water Builder's License "U" Underground Coverage - included Thirty (30) days' notice of cancellation applies



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

The Ohio Casualty Insurance Company
POWER OF ATTORNEY

Principal: Koski Construction Company
Agency Name: AssuredPartners of Ohio, LLC Bond Number: 32S520712
Obligee: ASHTABULA COUNTY DEPT. OF ENVIRONMENTAL SERVICES
Bond Amount: (\$10,000.00) Ten Thousand Dollars And Zero Cents

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint Lisa McFarland in the city and state of Richfield, OH, each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 28th day of March, 2021.



The Ohio Casualty Insurance Company

By: *David M. Carey*
David M. Carey, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email HOSUR@libertymutual.com.

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 28th day of March, 2021, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal
Teresa Pastella, Notary Public
Montgomery County
My commission expires March 28, 2025
Commission number 1126044
Member, Pennsylvania Association of Notaries

By: *Teresa Pastella*
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

ARTICLE IV – OFFICERS: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature or electronic signatures of any assistant secretary of the Company or facsimile or mechanically reproduced or electronic seal of the Company, wherever appearing upon a certified copy of any power of attorney or bond issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that this power of attorney executed by said Company is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 1st day of December, 2023.



By: *Renee C. Llewellyn*
Renee C. Llewellyn, Assistant Secretary

RECEIPT DATE 12.13.23 No. 449708

RECEIVED FROM Koski Construction \$ 50.00

2024 Water & Sewer License DOLLARS

FOR RENT
 FOR 1/2 Water & 1/2 Sewer

ACCOUNT	
PAYMENT	<u>77540</u>
BAL. DUE	

CASH
 CHECK
 MONEY ORDER
 CREDIT CARD

FROM _____ TO _____

BY MH

3-11

THIS DOCUMENT HAS A COLORED BACKGROUND AND INVISIBLE FLUORESCENT FIBERS - VIEW UNDER BLACK LIGHT

KOSKI CONSTRUCTION COMPANY
 P.O. BOX 1038
 ASHTABULA, OH 44005-1038
 (440) 997-5337

KEYBANK NATIONAL ASSOCIATION
 6-103/410

77540

CHECK NO.
77540

*****FIFTY DOLLARS AND 00 CENTS*****

DATE AMOUNT

12/11/23 *****50.00

PAY TO THE ORDER OF

ASHTABULA COUNTY DES
 36 W. WALNUT STREET
 P.O. BOX 520
 JEFFERSON OH 44047

Mary H. Kird
 AUTHORIZED SIGNATURE

MICRO-PRINT SIGNATURE LINE - MAGNIFY TO VIEW

⑈077540⑈ ⑆041001039⑆ 00352601009280⑈

2024

APPLICATION FOR SEWER AND WATER BUILDER'S LICENSE

Ashtabula County Department of Environmental Services

Date: 12-1-2023

The undersigned does hereby apply to the Ashtabula County Board of Commissioners for a SEWER AND WATER BUILDER'S LICENSE for the purpose of constructing all sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water services thereto in the Ashtabula County Sewer and Water District in accordance with the regulations and specifications of the Ashtabula County Department of Environmental Services. Failure of the sewer and water builder to answer any of the following questions, comply with any rules and regulations, or the direct orders of the Sanitary Engineer, his duly authorized assistants or inspectors shall be deemed just cause for the non-issuance and/or revocation of the Sewer and Water Builder's License. Falsification of this form, or any negligence under licensure, may result in legal action in accordance with Sections 6117 and 6103 of the Ohio Revised Code.

1. Business Name Joe Simak & Sons Trucking, Inc.
d.b.a. SIMAK TRUCKING & EXCAVATING, INC.
2. Owner's Name Marlene K. Picard
3. Business Address 3052 E. Center St. P.O. Box 599
NORTH KINGSVILLE, OH 44068
4. Home Address 3781 Stoneridge Cr. P.O. Box 543
NORTH KINGSVILLE, OH 44068

-
5. Primary Telephone Number 440.224.1992
 6. Email jaimie@simaktrucking.com (for correspondence only)
 7. Employer Tax Identification Number 34-1309014
 8. Number of years licensed by Ashtabula County Sanitary Engineer 27

2024 SEWER AND WATER

BUILDER'S LICENSE APPLICATION FORM

9. Years of experience constructing sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water line services.
27 years
10. Percentage of work pertinent to construction of sanitary sewer mains and appurtenances, sanitary laterals, water mains and appurtenances and water line services. 15 %

11. Cities, Villages or Townships in which Applicant has performed work during the past two (2) years and the official, preferably an engineer, having personal knowledge of the Applicant's workmanship and character.

AREA	PERSON	OFFICIAL CAPACITY	PHONE	TYPE OF WORK PERFORMED
Ashabula County	Noah Pierce	Superintendent	440.576.3722	Sewer
City of Conneaut	Brian Bidwell	Superintendent	440.593.7434	Sewer
Ashabula City	Bill Jepson	Superintendent	440.855.1062	Sewer

12. Equipment owned or leased by Applicant for the construction of sewers and water lines.

TYPE OF EQUIPMENT (MAKE & MODEL)	LEASED/OWNED (L or O)		
KOMATSU PC300 EXCAVATOR	O		
CASE BACKHOE 580 SN	O		
NEW HOLLAND E55BX MINI EXCAVATOR	O		
KOBELCO 210 EXCAVATOR	O		
CAT D6K DOZER	O		
KOMATSU PC138 EXCAVATOR	O		

Names of Applicant's employees normally utilized as pipe layers and level of experience of each. Attach additional sheets if necessary.

NAME	YEARS OF EXPERIENCE
Eric McCroskey	27
Bradley Feters	17
Richard Watt	14
James Eaton	12
Jonathan Moore	7

As the Applicant, by signing below I acknowledge and, and agree to comply with the specifications and standards listed in the Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System Code.

SIGNATURE Marlene Picard

Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT

I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

dba
Simak Trucking & Excavating, Inc.
Company Name (please print)

Eric S. McCroskey
President Name (please print)

Eric S McCroskey
President's Signature

Sworn to and subscribed before me, a notary public, this 5th day of
December, 2023 at the City of North Kingsville,
County of Ashtabula, and State of Ohio.

Lisa M Fees
Notary Public
My Commission Expires: 5/31/27



SEAL
LISA M FEES
Notary Public, State of Ohio
My Comm. Expires 05/31/2027

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Eric S. McCroskey, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT Eric S McCroskey
TITLE Vice President
COMPANY NAME dba: Simak Trucking & Excavating, Inc

Sworn to and subscribed in my presence this 5th day of December,
2023, City of North Kingsville, County of Ashtabula,
State of Ohio.



SEAL
LISA M FEES
Notary Public, State of Ohio
My Comm. Expires 05/31/2027

Lisa M Fees
Notary Public
My Commission Expires: 5/31/27

Commissioner / Date

Christina Foxton for CMO Toole 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

Commissioner / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date

****Please use this BOND FORM provided- Continuation forms will NOT be accepted.**

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License BOND**

KNOWN ALL MEN BY THESE PRESENTS:

That I/We Joe Simak & Sons Trucking, Inc., as Principal and Merchants Bonding Company (Mutual) as Surety, are held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars (\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for which payment well and truly made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents, for a term that begins on January 1, 2024 and ends on December 31 of the same year.

WHEREAS, said Joe Simak & Sons Trucking, Inc. Principal, has this day been granted a sewer and water builder's license by the County Commissioners of Ashtabula in accordance with the provisions of a Resolution Ashtabula County Commissioners Journal, and under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

NOW, THEREFORE, the condition of this obligation is such that if the said Joe Simak & Sons Trucking, Inc. Principal, shall at all times hereafter as sewer and water builder under said license, well and truly perform and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto, and shall save said County harmless from all damages that may arise from his negligence, or the negligence of anyone in his employ, including the failure to fully restore property in kind, and shall conform to and abide by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37 and such other requirements as said County may make in relation to plumbing and to the direction of the Sanitary Engineer for said County, then this obligation is to be void otherwise to remain in full force and effect.

Signed, sealed and dated this 30th day of October, year 2023.

SEAL

Joe Simak & Sons Trucking, Inc.
Marlene Klicaud
Principal
Merchants Bonding Company (Mutual)
Carrie Mahon
Surety Carrie Mahon, Attorney-in-Fact

Board of Ashtabula County Commissioners

Approved as to Legal Form: Ashtabula County, Ohio

Commissioner / Date

Cheryl R. Trotter for CMD Toole 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date

Commissioner / Date

MERCHANTS
BONDING COMPANY™
POWER OF ATTORNEY

Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of Iowa, d/b/a Merchants National Indemnity Company (in California only) (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

Carrie Mahon

their true and lawful Attorney(s)-in-Fact, to sign its name as surety(ies) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the following By-Laws adopted by the Board of Directors of Merchants Bonding Company (Mutual) on April 23, 2011 and amended August 14, 2015 and adopted by the Board of Directors of Merchants National Bonding, Inc., on October 16, 2015.

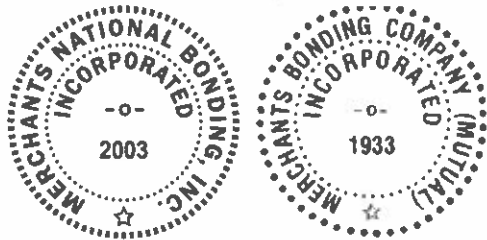
"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

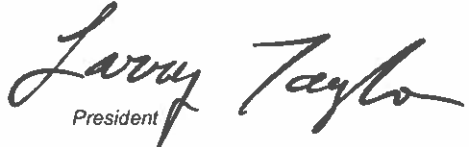
In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and authority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner-Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 30th day of October, 2023.

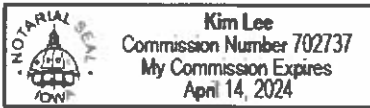


MERCHANTS BONDING COMPANY (MUTUAL)
MERCHANTS NATIONAL BONDING, INC.
d/b/a MERCHANTS NATIONAL INDEMNITY COMPANY

By 
President

STATE OF IOWA
COUNTY OF DALLAS ss.

On this 30th day of October, 2023, before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC.; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies; and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.

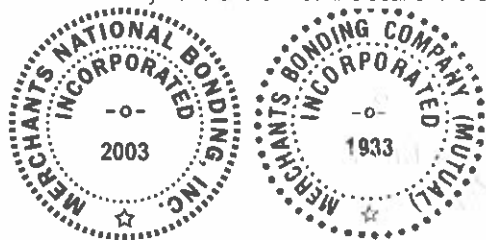



Notary Public

(Expiration of notary's commission does not invalidate this instrument)

I, William Warner, Jr., Secretary of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by said Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 30th day of October, 2023.




Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/05/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Taylor Oswald, LLC 1100 Superior Avenue East Suite 1300 Cleveland OH 44114	CONTACT NAME: Lisa Hudson PHONE (A/C, No, Ext): (216) 367-8787 E-MAIL ADDRESS: lhudson@tayloroswald.com FAX (A/C, No): (216) 241-4520
	INSURER(S) AFFORDING COVERAGE INSURER A: American Select Insurance Co. NAIC # 19992 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Joe Simak & Sons Trucking Inc P O Box 599 North Kingsville OH 44068	

COVERAGES **CERTIFICATE NUMBER:** CL2312594303 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			TRA375935Y	12/11/2023	12/11/2024	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY			TRA375935Y	12/11/2023	12/11/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			TRA375935Y	12/11/2023	12/11/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		TRA375935Y	12/11/2023	12/11/2024	<input type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH-ER Employers Liab E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Underground included. 30 days written notice of cancellation.

CERTIFICATE HOLDER**CANCELLATION**

Ashtabula County Dept of Environmental Services 25 W Jefferson Street Jefferson OH 44047	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	---

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MACK INDUSTRIES

ISSUES THIS CERTIFICATE IN ACCORDANCE WITH
PROVISIONS OF THE

OHIO HEALTH DEPARTMENT

ACCREDITED TRAINING AS CONDUCTED BY:
MACK INDUSTRIES, INC., NORWECO, INC., ANUA, RICE BENNET & WILLIAMS
ENVIRONMENTAL CONSULTANTS AND ELJEN CORPORATION
AND HEREBY OFFICIALLY GRANTS AND CONVEYS 6 EDUCATIONAL CREDIT HOURS TO:

BRAD FETTERS

SIMAK TRUCKING & EXCAVATING INC

THIS CERTIFICATE ACKNOWLEDGES TRAINING IN:

DESIGNING ODH APPROVED ON-SITE WASTEWATER SYSTEMS, ON-LOT SEPTIC FIELD LIMITING CONDITIONS, WHAT ARE THEY,
WHERE ARE THEY FOUND? WHY DO THEY MATTER?, ANUA PAD DISPERSAL DRAINFIELD OPTION PER OHIO ADMINISTRATIVE
CODE CHAPTER 301-29, NORWECO APPROVED SYSTEMS FOR USE IN OHIO, DESIGN FACTORS AND UTILIZING ELJEN PRODUCTS
COURSE NUMBER: OEPA-588874915-X

JULY 21, 2023

DATE

MACK INDUSTRIES, INC.

RECEIPT DATE 12.8.23 No. 449703

RECEIVED FROM Simak Trucking & Excavating, Inc. \$ 50.00

2024 Water & Sewer License DOLLARS

FOR RENT FOR 1/2 Water & 1/2 Sewer

ACCOUNT		<input type="radio"/> CASH	FROM _____ TO _____
PAYMENT	<u>11208</u>	<input checked="" type="radio"/> CHECK	
BAL. DUE		<input type="radio"/> MONEY ORDER	BY <u>MH</u>
		<input type="radio"/> CREDIT CARD	

3-11



SIMAK TRUCKING & EXCAVATING, INC.
3052 EAST CENTER STREET, P.O. BOX 599
NORTH KINGSVILLE, OHIO 44068
440.224.1992



56-258/412

11208

DATE

Dec 5, 2023

AMOUNT

\$ 50.00

PAY Fifty and 00/100 Dollars

TO THE ORDER OF:

ASH CNTY DEPT OF ENVIRONMENTAL SERVICES
PO BOX 520
JEFFERSON, OH 44047



James J. Reed
AUTHORIZED SIGNATURE

FD Security features. Details on back.

Memo:

⑈0 1 1208⑈ ⑆04 1 20 258 2⑆ 130 1 18943 25 2⑈



Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

I, Thomas Bukky am authorized to execute on behalf of Star Excavating Inc.

the renewal of the Water and Sewer Builder's License number 2023-02, originating with Ashtabula County on 1-17-23. My signature verifies that there have been no changes made to the original license. I

understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance, affidavit form for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the

Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for Star Excavating Inc. company, until December 31, 2024.

President/Owner signature Thomas Bukky Pres Phone number 440-428-4928

Sworn to and subscribed in my presence this 8 day of December 26 23, City of Madison, County of Lake, State of OHIO

Cheryl Bennett
Notary Public My Commission Expires: 09/04/28

CHERYL BENNETT
Notary Public, State of Ohio
Commission No. 2018-RE-742122
My Commission Expires
September 4, 2028

[Signature] 12-12-23
Ashtabula Co. Sanitary Engineer / Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

[Signature]
Ashtabula Co. Prosecuting Attorney / Date 12-20-23

Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT

I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

Star Excavating Inc.
Company Name (please print)

Thomas Bukky
President Name (please print)

Tom Bukky Pres
President's Signature

Sworn to and subscribed before me, a notary public, this 8 day of
December, 2023 at the City of Madison,
County of lake, and State of Ohio.

Cheryl Bennett
Notary Public
My Commission Expires: 09/04/28.

SEAL



CHERYL BENNETT
Notary Public, State of Ohio
Commission No. 2018-RE-742122
My Commission Expires
September 4, 2028

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Thomas Bukky, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT Thomas Bukky Pres.
TITLE President
COMPANY NAME Star Excavating, Inc.

Sworn to and subscribed in my presence this 8 day of December,
2023, City of Madison, County of Lake,
State of Ohio.



CHERYL BENNETT
Notary Public, State of Ohio
Commission No. 2018-RE-742122
My Commission Expires
September 4, 2028

Cheryl Bennett
Notary Public

My Commission Expires: 09/04/28

Commissioner / Date

Cheryl Bennett for CMO Todd 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

Commissioner / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date

****Please use this BOND FORM provided- Continuation forms will NOT be accepted.**

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License BOND**

KNOWN ALL MEN BY THESE PRESENTS:

Bond No. 64453413

That I/we Star Excavating, Inc.,
as Principal and WESTERN SURETY COMPANY as Surety, are
held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars
(\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for
which payment well and truly made, we bind ourselves, our heirs, executors and administrators,
successors and assigns, jointly and severally, firmly by these presents, for a term that begins on
January 1st, 2024 and ends on December 31 of the same year.

WHEREAS, said Star Excavating, Inc.
Principal, has this day been granted a sewer and water builder's license by the County Commissioners of
Ashtabula in accordance with the provisions of a Resolution Ashtabula County Commissioners Journal, and
under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage
Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

NOW, THEREFORE, the condition of this obligation is such that if the said Star Excavating, Inc.

Principal, shall at all times hereafter as sewer and water builder under said license, well and truly perform
and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto,
and shall save said County harmless from all damages that may arise from his negligence, or the negligence
of anyone in his employ, including the failure to fully restore property in kind, and shall conform to and abide
by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF
THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF
OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37
and such other requirements as said County may make in relation to plumbing and to the direction of the
Sanitary Engineer for said County, then this obligation is to be void otherwise to remain in full force and
effect.

Signed, sealed and dated this 27th day of November, year 2023.



Board of Ashtabula County Commissioners

Commissioner / Date

Commissioner / Date

Commissioner / Date

Thomas Bully Dies,
Principal
WESTERN SURETY COMPANY

BY Larry Kasten
Surety
Larry Kasten,
Vice President

Approved as to Legal Form: Ashtabula County, Ohio

Cheryl A. Fortinck for CMO Todd 12-20-23
Ashtabula County Prosecuting Attorney / Date

Ariz A 12-12-23
Ashtabula County Sanitary Engineer / Date

Office of Risk Assessment
50 West Town Street
Third Floor - Suite 300
Columbus, Ohio 43215
(614)644-2658
Fax(614)644-3256
www.insurance.ohio.gov

Ohio Department of Insurance

Mike DeWine - Governor

Judith French - Director

Certificate of Compliance



Issued 03/14/2023
Effective 04/02/2023
Expires 04/01/2024

I, Judith French, hereby certify that I am the Director of Insurance in the State of Ohio and have supervision of insurance business in said State and as such I hereby certify that

WESTERN SURETY COMPANY

of South Dakota is duly organized under the laws of this State and is authorized to transact the business of insurance under the following section(s) of the Ohio Revised Code:

Section 3929.01 (A)

Fidelity

Other Liability

Surety



WESTERN SURETY COMPANY certified in its annual statement to this Department as of December 31, 2022 that it has admitted assets in the amount of \$2,105,593,621, liabilities in the amount of \$589,010,150, and surplus of at least \$1,516,583,471.

IN WITNESS WHEREOF, I have hereunto subscribed my name and caused my seal to be affixed at Columbus, Ohio, this day and date.

Judith L. French

Judith French, Director





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/01/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER NMD Insurance 38033 Euclid Ave Ste T-12 Willoughby, OH 44094	CONTACT NAME: Taylor M Carroscia PHONE (A/C, No, Ext): (440)942-3251 FAX (A/C, No): (440)942-3295 E-MAIL ADDRESS: taylor@nmdinsurance.com
	INSURER(S) AFFORDING COVERAGE INSURER A: Ohio Mutual Ins Group INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Star Excavating, Inc. 5818 North Ridge Road Madison, OH 44057	


COVERAGES **CERTIFICATE NUMBER: 00001330-1953274** **REVISION NUMBER: 38**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Included GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	CPP0003345	05/24/2023	05/24/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY		CPP0003345	05/24/2023	05/24/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		CX 0000250	05/24/2023	05/24/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	CPP0003345	05/24/2023	05/24/2024	<input type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder is also listed as Additional Insured.

30 Days Notice of Cancellation will be provided for all reasons other than non-payment which provides 10 days notice.
Underground coverages XCU are included.

CERTIFICATE HOLDER Ashtabula County Department of Environmental Services 36 W Walnut St Jefferson, OH 44047	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE  (TMC)
--	---

RECEIPT

DATE 12.8.23No. 449705RECEIVED FROM Star Excavating Inc.\$ 50.002024 Water & Sewer License

DOLLARS

 FOR RENT FOR1/2 water & 1/2 Sewer

ACCOUNT	
PAYMENT	<u>8417</u>
BAL. DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM _____ TO _____

BY _____

3-11



Star Excavating, Inc
5818 North Ridge Road
Madison, OH 44057

8417

6-103/410

DATE 12-6-23

PAY TO THE ORDER OF

Ashtabula County Environmental Services\$ 50.00Fifty dollars & 00/100

DOLLARS



KeyBank National Association

FOR _____

⑈008417⑈ ⑆041001039⑆ 350321003864⑈



Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

I, Timothy J. Smith am authorized to execute on behalf of TJ Smith,
the renewal of the Water and Sewer Builder's License number 2023-29, originating with Ashtabula
County on _____, My signature verifies that there have been no changes made to the original license. I

EXCAVATING LLC
understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance, affidavit form for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for TJ Smith Excavating
December 31, 2024 company, until LLC

President/Owner signature Timothy J. Smith Phone number 440-487-4262

Sworn to and subscribed in my presence this 29th day of NOV., 2023, City of Chardon,

County of Cuyahoga, State of OHIO



Lisa Ball
Notary Public My Commission Expires: Oct 21, 2023

[Signature] 12-12-23
Ashtabula Co. Sanitary Engineer / Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

Cheryl A. Fentress for CMO Tade 12-20-23
Ashtabula Co. Prosecuting Attorney / Date

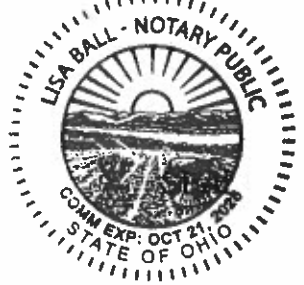
Ashtabula Co. Commissioner Date

2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION

Timothy J Smith, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT Tim J Smith
TITLE Sole member
COMPANY NAME TJ Smith Excav. LLC

Sworn to and subscribed in my presence this 29th day of November,
2023, City of Chardon, County of Geauga,
State of OHIO.



Lisa Ball
Notary Public

My Commission Expires: Oct 21, 2028

Commissioner / Date

Christy A. Fortnum for CMOTorb 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

Commissioner / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT**

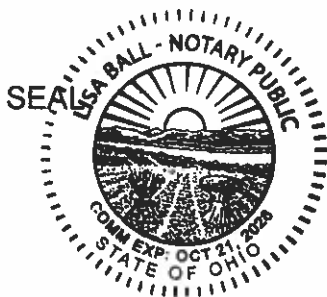
I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

TJ Smith Excavating LLC
Company Name (please print)

Timothy J. Smith
President Name (please print) *sole member*

Timothy J. Smith
President's Signature
sole member

Sworn to and subscribed before me, a notary public, this 29th day of
November, 2023 at the City of Chardon,
County of Geauga, and State of OHIO.



Lisa Ball
Notary Public
My Commission Expires: Oct 21, 2028

****Please use this BOND FORM provided- Continuation forms will NOT be accepted.**

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License BOND**

KNOWN ALL MEN BY THESE PRESENTS:

That I We TJ Smith Excavating LLC, as Principal and The Ohio Casualty Insurance as Surety, are held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars (\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for which payment well and truly made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents, for a term that begins on 1/1/2024 and ends on December 31 of the same year.

WHEREAS, said TJ SMITH EXCAVATING LLC Principal, has this day been granted a sewer and water builder's license by the County Commissioners of Ashtabula in accordance with the provisions of a Resolution Ashtabula County Commissioners Journal, and under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

NOW, THEREFORE, the condition of this obligation is such that if the said TJ SMITH EXCAVATING LLC Principal, shall at all times hereafter as sewer and water builder under said license, well and truly perform and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto, and shall save said County harmless from all damages that may arise from his negligence, or the negligence of anyone in his employ, including the failure to fully restore property in kind, and shall conform to and abide by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37 county may make in relation to plumbing and to the direction of the this obligation is to be void otherwise to remain in full force and



of December, year 2023.

TJ SMITH EXCAVATING LLC
Principal

Juan Hatcher
Surety Juan Hatcher Attorney In Fact

Approved as to Legal Form: Ashtabula County, Ohio

Cheryl Rostantini for CMO Torkle 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

Commissioner / Date

Commissioner / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

The Ohio Casualty Insurance Company
POWER OF ATTORNEY

Surety Bond Number: 999150465 Principal: TJ SMITH EXCAVATING LLC

Bond Amount: (\$10,000.00) Ten Thousand Dollars And Zero Cents

KNOW ALL PERSONS BY THESE PRESENTS: that The Ohio Casualty Insurance Company, a corporation duly organized under the laws of the State of New Hampshire (herein collectively called the "Company"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Timothy A. Mikolajewski

all in the city of St. Louis, state of Missouri each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Company in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of the Company has been affixed thereto this 26th day of September, 2016.



The Ohio Casualty Insurance Company

By: [Signature of David M. Carey]

David M. Carey, Assistant Secretary

STATE OF PENNSYLVANIA
COUNTY OF MONTGOMERY ss

On this 26th day of September, 2016, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of The Ohio Casualty Insurance Company and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



Commonwealth of Pennsylvania - Notary Seal
Teresa Pastella, Notary Public
Montgomery County
My commission expires March 28, 2025
Commission number 1128044
Member, Pennsylvania Association of Notaries

By: [Signature of Teresa Pastella]

Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-law and Authorizations of The Ohio Casualty Insurance Company, which is now in full force and effect reading as follows:

ARTICLE IV - OFFICERS - Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Gregory W. Davenport, the undersigned, Assistant Secretary, of The Ohio Casualty Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Company, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Company this 1st day of December, 2023



By: [Signature of Renee C. Llewellyn]

Renee C. Llewellyn, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

For bond and/or Power of Attorney (POA) verification inquiries, please call 610-832-8240 or email HOSUR@libertymutual.com.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/16/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Strachan Novak Insurance Services 2190 E Enterprise Parkway Twinsburg, OH 44087	CONTACT NAME: Autumn H. Dackiewicz
	PHONE (A/C No, Ext): (330)963-3800 FAX (A/C No): (330)963-3811 E-MAIL ADDRESS: adack@sn-insure.com
INSURED TJ Smith Excavating LLC 11230 Hosford Rd Chardon, OH 44024	INSURER(S) AFFORDING COVERAGE
	INSURER A: Liberty Mutual Insurance NAIC #
	INSURER B: Liberty Mutual Insurance 24082
	INSURER C:
	INSURER D:
	INSURER E:

COVERAGES **CERTIFICATE NUMBER: 00009095-599644** **REVISION NUMBER: 30**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> undeground hazard <input checked="" type="checkbox"/> included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		BKS63022045	05/01/2023	05/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY		BAS63022045	05/01/2023	05/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		USO63022045	05/01/2023	05/01/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N N/A If yes, describe under DESCRIPTION OF OPERATIONS below		BKS63022045	05/01/2023	05/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Deductible \$500		BKS63022045	05/01/2023	05/01/2024	Rented Equipment 150,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
10 day notice of cancellation for non-payment, 30 day notice for all other reasons.

CERTIFICATE HOLDER

Ashtabula County
PO Box 520
Jefferson, OH 44047

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

(AHD)

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RECEIPT

DATE 12.8.23No. 449701RECEIVED FROM TJ Smith Excavating LLC \$ 50.002024 Water & Sewer License DOLLARS FOR RENT 1/2 water & 1/2 sewer FOR

ACCOUNT		<input type="radio"/> CASH
PAYMENT	<u>6079</u>	<input checked="" type="radio"/> CHECK
BAL. DUE		<input type="radio"/> MONEY ORDER
		<input type="radio"/> CREDIT CARD

FROM _____ TO _____

BY MH

3-11



TJ Smith Excavating, LLC
11230 Hosford Rd
Chardon, OH 44024-9640

6079

25-2/440

DATE 11-17-23

PAY TO THE ORDER OF

Ashtabula Dept Envir. Servs \$ 50.00Ft. City - no / 100

DOLLARS



JP Morgan Chase Bank, N.A.
Columbus, OH 43271
www.Chase.com

FOR

license renewal

⑈006079⑈ ⑆044000037⑆

781831359⑈



Ashtabula County Water and Sewer Builder's License RENEWAL Application

In order to file a renewal application, you must – have been issued a certificate of license by Ashtabula County in 2023 (license number required), be able to provide current insurance and bonding paperwork with POA paperwork, and provide a copy of the previous year's notarized verification page.

I, Ryan Cochran am authorized to execute on behalf of Union Industrial Contractors the renewal of the Water and Sewer Builder's License number 2023-12, originating with Ashtabula County on February 10th 2023. My signature verifies that there have been no changes made to the original license. I understand that I am required to provide a current notarized Bond Form with POA paperwork, current proof of insurance, affidavit form for the licensing year, and a copy of the verification form from the original application stated above. I attest that I am aware of, and agree to comply with current specifications and standards set by the Ashtabula County Sanitary Engineering Code, Connections to Public Sewers, and the Ashtabula County Public Water System code. Renewal applications submitted by December 10th are \$50.00. Submissions after the deadline will be \$100.00 made payable to Ashtabula County Environmental Services.

Once approved, this renewal form extends the licensing term for Union Industrial Contractors company, until December 31, 2024.

President/Owner signature [Signature] Phone number (440) 998-7811

Sworn to and subscribed in my presence this 22nd day of NOVEMBER 2023, City of ASHTABULA, County of ASHTABULA, State of OHIO.



JESSICA HUFFMAN
Notary Public
State of Ohio
My Comm. Expires
January 24, 2028

Jessica Huffman
Notary Public My Commission Expires: _____

[Signature] 12-12-23
Ashtabula Co. Sanitary Engineer / Date

Ashtabula Co. Commissioner Date

Ashtabula Co. Commissioner Date

[Signature] 12-20-23
Ashtabula Co. Prosecuting Attorney / Date

Ashtabula Co. Commissioner Date

**2024 SEWER AND WATER
BUILDER'S LICENSE APPLICATION
FORM VERIFICATION**

Ryan Cochran, being first duly sworn, says that they are the officer or person duly authorized to execute the foregoing application, and that the statements made and answers therein, are true to the best of his knowledge.

SIGNATURE OF APPLICANT [Signature]
TITLE Ryan Cochran - President
COMPANY NAME Union Industrial Contractors Inc.

Sworn to and subscribed in my presence this 22nd day of November,
2023, City of Ashtabula, County of Ashtabula,
State of Ohio.



JESSICA HUFFMAN
Notary Public
State of Ohio
Comm. Expires
January 24, 2028

Jessica Huffman
Notary Public
My Commission Expires: _____

Commissioner / Date

Chris Rotondo for CMO Toole 12-20-23
Ashtabula County Prosecuting Attorney / Date

Commissioner / Date

[Signature] 12-12-23
Ashtabula County Sanitary Engineer / Date

Commissioner / Date

**Ashtabula County Dept. of Environmental Services
2024 Sewer & Water Builder's License AFFIDAVIT**

I/We hereby certify that all outstanding bills for labor and materials for the previous years have been paid in full. I/We further certify that all outstanding Ashtabula County property taxes, personal property taxes, and any other Ashtabula County bills for the previous years have been paid in full. I/We further hereby certify that I/we are not currently involved in any litigation, which affects Ashtabula County, nor have I/we been legally convicted of violations of Ohio Revised Code 6103.29 or 6117.45 *et seq.* It is further agreed that my/our license will not be issued if any of the above items are outstanding relative to any previous company, corporation, partnership, individual, etc., of which I/we were associated with or whom I/we are now associated with. And, it is further agreed that I/we are not, nor is any shareholder, partner, person with ownership interest, employee or worker who has held a license in the past, currently in less than good standing with Ashtabula County and its departments. I/We further agree that a separate Ashtabula County Dept. of Environmental Services sewer or water installation permit shall be required on ALL main lines to be constructed in the public right-of-way and/or an Ashtabula County dedicated easement. I/We also agree that all inspection deposits shall be kept current and shall not fall in arrears. Any of the listed above shall be cause to deny the issuance or revocation of any license. The name and signature listed below attest and agree with said denial and/or immediate revocation of an existing Ashtabula County Dept. of Environmental Services Sewer & Water Builder's License.

Union Industrial Contractors Inc.
Company Name (please print)

Ryan Cochran
President Name (please print)


President's Signature

Sworn to and subscribed before me, a notary public, this 4th day of
December, 2023 at the City of Ashtabula,
County of Ashtabula, and State of Ohio.



JESSICA HUFFMAN
Notary Public
State of Ohio
My Comm. Expires
January 24, 2028

Jessica Huffman
Notary Public
My Commission Expires: _____

Ashtabula County
Dept. of Environmental
Services 2024 Sewer &
Water Builder's License

BOND

BND 0149920

KNOWN ALL MEN BY THESE PRESENTS:

That I/We Union Industrial Contractors, Inc., as Principal and Westfield Insurance Company as Surety, are held and firmly bound unto the County of Ashtabula, State of Ohio, in the sum of Ten Thousand Dollars (\$10,000.00) good and lawful money of the United States, to be paid to the County of Ashtabula, for which payment well and truly made, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents, for a term beginning on 01/01/2024 and ending on December 31 of same year.

WHEREAS, said Union Industrial Contractors, Inc. Principal, has this day been granted a sewer and water builder's license by the County Commissioners of Ashtabula in accordance with the provisions of a Resolution Vol. _____, Page _____, Ashtabula County Commissioners Journal, and under the terms and conditions set forth in the Standard Specification for the Construction of Sewerage Improvements in Ashtabula County, duly adopted by the Commissioners of Ashtabula County, Ohio.

NOW, THEREFORE, the condition of this obligation is such that if the said Union Industrial Contractors, Inc. shall at all times hereafter as sewer and water builder under said license, well and truly perform and discharge the duties imposed upon him/her by said Standard Specifications or any amendment thereto, and shall save said County harmless from all damages that may arise from his negligence, or the negligence of anyone in his employ, including the failure to fully restore property in kind, and shall conform to and abide by THE ASHTABULA COUNTY SANITARY ENGINEERING CODE, THE OHIO SANITARY CODE OF THE STATE OF OHIO DEPARTMENT OF HEALTH AND OF THE PUBLIC HEALTH COUNCIL OF OHIO AND ALL REGULATIONS ISSUED THEREUNDER as provided by REVISED CODE, TITLE 37 and such other requirements as said County may make in relation to plumbing and to the direction of the Sanitary Engineer for said County, then this obligation is to be void otherwise to remain in full force and effect.

Signed, sealed and dated this 20th day of November, year 2023.



SEAL

Union Industrial Contractors, Inc.

[Signature]
Principal
[Signature]
Westfield Insurance Company

Surety Paul Cruciani, Attorney-in-Fact

Board of Ashtabula County Commissioners
Ashtabula County, Ohio

Approved as to Legal Form:

Commissioner

Ashtabula County Prosecuting Attorney

Commissioner

Approved:

Commissioner

[Signature] 12-12-23

Shawn Aiken, P.E.
Ashtabula County Sanitary Engineer

CERTIFIED COPY

1 Park Circle, PO Box 5001, Westfield Center, Ohio 44251-5001

Know All Men by These Presents, That **Westfield Insurance Company**, a corporation, hereinafter referred to individually as a "Company" duly organized and existing under the laws of the State of Ohio, and having their principal offices in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint of **North Canton** and State of **OH** its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in their name, place and stead, to execute, acknowledge and deliver

Bond Number: **BND 0149920**
Principal Name: **Union Industrial Contractors, Inc.**
Obligee Name: **Ashtabula County**
Bond Penalty: \$ **10,000.00**

and to bind the Company thereby as fully and to the same extent as if such bond was signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of the **Westfield Insurance Company**

"**BE IT RESOLVED**, that the President, any Senior Executive, any Secretary or any Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents cancelling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon The Company as if signed by the President and sealed and attested by the Corporate Secretary."

"**BE IT FURTHER RESOLVED**, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000.)

In Witness Whereof, **Westfield Insurance Company** has caused these presents to be signed by their Senior Executive and their corporate seal to be hereto affixed this 17th day of December 2019.

By: Gary W. Stumper, National Surety Leader and Senior Executive

Affixed
Corporate
Seal



CERTIFICATE

I, **Frank Carrino**, Secretary of the **Westfield Insurance Company**, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Company, which is still in full force and effect; and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Company at Westfield Center, Ohio, this 20th day of November, A.D., 2023.

By: Frank Carrino, Secretary

State of Ohio
County of Medina ss:

On this 17th day of December, A.D., 2019, before me personally came Gary W. Stumper, to me known, who, being by me duly sworn, did depose and say, that he resides in Hartford, CT; that he is National Surety Leader and Senior Executive of **Westfield Insurance Company** the company described in and which executed the above instrument; that he knows the seal of said Company; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said Company; and that he signed his name thereto by like order.

Notarial
Seal
Affixed



By: **David A. Kotnik**, Attorney at Law, Notary Public
My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

State of Ohio
County of Medina ss.:

Financial Statement

Reset Form

December 31, 2022

Westfield Insurance Co.
Westfield Center, Ohio 44251-5001

WESTFIELD INSURANCE COMPANY

BALANCE SHEET

12/31/22

(in thousands)

Assets	
Cash, cash equivalents, and short term investments	14,523
Bonds	1,431,438
Stocks	409,103
Agents' balances and uncollected premiums, net	407,991
Other admitted assets	999,270
Total admitted assets	<u>3,262,325</u>
 Liabilities	
Reserve for unearned premiums	612,303
Reserve for unpaid losses and loss expenses	1,046,687
Reserve for taxes and other liabilities	351,958
Total liabilities	<u>2,010,948</u>
 Capital stock	 8,220
Surplus to policyholders	<u>1,243,157</u>
 Total surplus	 1,251,377
 Total liabilities and surplus	 <u>3,262,325</u>

State of Ohio

ss:

County of Medina

The undersigned, being duly sworn, says: That he is National Surety Leader - Surety Operations of Westfield Insurance Company, Westfield Center, Ohio; that said Company is a corporation duly organized, existing and engaged in business as a Surety Company by virtue of the Laws of the State of Ohio and authorized to do business in the State ofOhio..... and has duly complied with all the requirements of the laws of said State applicable to said Company and is duly qualified to act as Surety under such laws; that said Company has also complied with and is duly qualified to act as Surety under the Act of Congress approved July 1947, 6 U.S.C. sec. 6-13; and that to the best of his knowledge and belief the above statement is a full, true, and correct statement of the financial condition of the said Company on the 31st day of December, 2022.

Attest:

Frank Carrino

Frank A. Carrino
Group Legal Leader, Secretary

Gary W. Stumper

Gary W. Stumper
National Surety Leader
Senior Executive



Sworn to before me this 8th day of February A.D. 2023.

My Commission Does Not Expire
Sec. 147.03 Ohio Revised Code

David A. Kotnik

David A. Kotnik
Attorney at Law
Notary Public - State of Ohio



Office of Risk Assessment
50 West Town Street
Third Floor - Suite 300
Columbus, Ohio 43215
(614)644-2658
Fax(614)644-3256
www.insurance.ohio.gov

Ohio Department of Insurance

Mike DeWine - Governor

Judith French - Director

Certificate of Compliance



Issued 06/14/2023

Effective 04/02/2023

Expires 04/01/2024

I, Judith French, hereby certify that I am the Director of Insurance in the State of Ohio and have supervision of insurance business in said State and as such I hereby certify that

WESTFIELD INSURANCE COMPANY

of Ohio is duly organized under the laws of this State and is authorized to transact the business of insurance under the following section(s) of the Ohio Revised Code:

Section 3929.01 (A)

Accident & Health	Inland Marine
Aircraft	Medical Malpractice
Allied Lines	Multiple Peril - Commercial
Boiler & Machinery	Multiple Peril - Farmowners
Burglary & Theft	Multiple Peril - Homeowners
Collectively Renewable A & H	Noncancellable A & H
Commercial Auto - Liability	Nonrenew-Stated Reasons (A&H)
Commercial Auto - No Fault	Ocean Marine
Commercial Auto - Physical Damage	Other
Credit Accident & Health	Other Accident only
Earthquake	Other Liability
Fidelity	Private Passenger Auto - Liability
Financial Guaranty	Private Passenger Auto - No Fault
Fire	Private Passenger Auto - Physical Damage
Glass	Surety
Group Accident & Health	Workers Compensation
Guaranteed Renewable A & H	

WESTFIELD INSURANCE COMPANY certified in its annual statement to this Department as of December 31, 2022 that it has admitted assets in the amount of \$3,262,324,661, liabilities in the amount of \$2,010,948,051, and surplus of at least \$1,251,376,610.

IN WITNESS WHEREOF, I have hereunto subscribed my name and caused my seal to be affixed at Columbus, Ohio, this day and date.

Judith L. French

Judith French, Director





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/2/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AssuredPartners of Ohio LLC, Richfield 3900 Kinross Lakes Parkway #300 Richfield OH 44286 License#: 954553 UNIOIND-01	CONTACT NAME: Lisa Trnjan	
	PHONE (A/C, No, Ext): 440-895-6584	FAX (A/C, No): 440-356-2126
E-MAIL ADDRESS: lisa.trnjan@assuredpartners.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Continental Casualty Company		20443
INSURER B: The Continental Insurance Company		35289
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		


COVERAGES **CERTIFICATE NUMBER:** 590582119 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU Not Excluded GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:		2071794888	6/1/2023	6/1/2024	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 15,000
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
							\$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY		2071794924	6/1/2023	6/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		2071794535	6/1/2023	6/1/2024	EACH OCCURRENCE	\$ 5,000,000
						AGGREGATE	\$ 5,000,000
							\$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	2071794888	6/1/2023	6/1/2024	PER STATUTE <input checked="" type="checkbox"/> OTH-ER	OH Employer Liab
						E.L. EACH ACCIDENT	\$ 1,000,000
						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 RE: Sewer & Water Builder's License - Underground coverage is not excluded. Thirty (30) day noc applies

CERTIFICATE HOLDER**CANCELLATION**

ACDES P.O. Box 520 Jefferson OH 44047 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	---

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RECEIPT DATE 12-8-23 No. 449704

RECEIVED FROM Union Industrial Con Inc \$ 50.00

2024 Water & Sewer DOLLARS

FOR RENT
 FOR 1/2 Water & 1/2 Sewer

ACCOUNT	
PAYMENT	
BAL. DUE	

CASH
 CHECK FROM _____ TO _____
 MONEY ORDER
 CREDIT CARD BY MTH

3-11

ORIGINAL DOCUMENT PRINTED ON CHEMICAL REACTIVE PAPER WITH MICROPRINTED BORDER

UNION INDUSTRIAL CONTRACTORS, INC.

(440) 998-7871 • FAX (440) 998-0026
P.O. BOX 1718
ASHTABULA, OHIO 44005-1718



HUNTINGTON NATIONAL BANK
NE OHIO

56-1503/412

71578

71578

DATE

11/30/2023

AMOUNT

*****50.00

PAY

THE SUM OF FIFTY DOLLARS AND NO CENTS *****

TO THE
ORDER
OF

ASH. COUNTY DEPT. OF ENV. SVCS
PO BOX 520
JEFFERSON, OH 44047

UNION INDUSTRIAL CONTRACTORS, INC.



Jessica Huffman
AUTHORIZED SIGNATURE



THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE - RED IMAGE DISAPPEARS WITH HEAT.

⑈071578⑈ ⑈041215032⑈ ⑈01789760055⑈