



Auditor-Controller/Treasurer/Tax Collector
Property Tax Division

222 W. Hospitality Lane
San Bernardino, CA 92415-0018
(909) 386-8828 Fax (909) 386-8820

DATE: _____

BOND NO.: _____

PREMIUM: _____

SURETY BOND TO GUARANTEE PAYMENT OF TAXES IN SUBDIVISIONS

KNOW ALL MEN BY THESE PRESENT: THAT WE, _____, AS PRINCIPAL, AND _____ AS SURETY, ARE HELD AND FIRMLY BOUND UNTO THE COUNTY OF SAN BERNARDINO, STATE OF CALIFORNIA, IN THE PENAL SUM OF _____ DOLLARS (_____) FOR THE PAYMENT OF WHICH SUM, WILL AND TRULY TO BE MADE, WE BIND OURSELVES, OUR HEIRS, EXECUTORS, SUCCESSORS, AND ASSIGNS, JOINTLY AND SEVERELY, BY THESE PRESENT.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT WHEREAS, THE OWNER(S) OF A DIVISION OF LAND REPRESENTING A CERTAIN SUBDIVISION OF REAL ESTATE, TO WIT: **TRACT /PARCEL MAP #** _____ INTENDS TO FILE A MAP THEREOF WITH THE RECORDER OF THE COUNTY OF SAN BERNARDINO. WHEREAS, THE PROVISION OF THE STATE LAW REQUIRE THAT THIS BOND BE FILED WITH THE CLERK OF THE BOARD OF SUPERVISORS OF SAID COUNTY.

NOW THEREFORE, IF SAID PRINCIPAL(S) SHALL PAY, OR CAUSE TO BE PAID, WHEN DUE, ALL TAXES AND SPECIAL ASSESSMENTS COLLECTED LIKE TAXES, WHICH AT THE TIME OF FILING SAID MAP, ARE A LIEN AGAINST THE PROPERTY WITHIN SAID SUBDIVISION OR ANY PART THEREOF, BUT NOT YET PAYABLE, THEN THIS OBLIGATION SHALL CEASE AND BE VOID, OTHERWISE IT SHALL REMAIN IN FORCE AND EFFECT UNTIL SAID TAXES WHICH INCLUDE AMOUNTS SHOWN ON THE REGULAR ASSESSMENT ROLL AND ANY SUPPLEMENTAL ROLL, ARE PAID IN FULL, INCLUDING ANY PENALTIES AND INTEREST INCURRED.

IN WITNESS THEREOF, SAID SURETY HAVE TO HERETO SET THEIR HANDS AND AFFIXED THEIR SEAL THIS _____ DAY OF _____, ____.

PRINCIPAL

SURETY

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

SIGNATURE _____

SIGNATURE _____

(THE NOTARIAL ACKNOWLEDGEMENT OF BOTH PRINCIPAL AND SURETY MUST BE ATTACHED)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____
County of _____)

On _____ before me, _____, Notary Public
(insert name and title of the officer)

personally appeared _____,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____
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WITNESS my hand and official seal.

Signature _____ (Seal)