

STATE OF GEORGIA  
COUNTY OF BALDWIN

Know all men by these presents, that \_\_\_\_\_, of \_\_\_\_\_ County, Georgia, as principal, and the \_\_\_\_\_, as surety, are held and firmly bound unto the **Baldwin County Department of Health** of Milledgeville and Baldwin County, Georgia, in the principal sum of Three Thousand and No/100 Dollars (\$3,000.00), lawful money of the United States of America, to be paid to the **Baldwin County Department of Health** for which payment well and truly to be made, we bind ourselves, our heirs, executors, administrators and assigns, jointly and severally by this instrument.

Whereas, the said \_\_\_\_\_ has been or is about to be bonded to the **Baldwin County Department of Health** to install or repair septic tanks and/or grease traps in Baldwin County.

Now, the condition of this obligation is such that if said \_\_\_\_\_ shall in conduct of said business well and truly and faithfully observe all the applicable regulations of the State of Georgia, that are now or may hereafter be lawfully prescribed, and shall indemnify and save harmless any person for whom work may be done in the conduct of said business from all damages that may result from any defective work or from failure to complete any work done in the conduct of said business in accordance with the applicable regulations of the City of Milledgeville and the County of Baldwin, Georgia, and shall save harmless any person for whom work may be done in the conduct of said business from all claims from personal injuries or damages to property of others caused or alleged to have been caused by or from the conduct of said business by the said \_\_\_\_\_; then this obligation to be void, otherwise, to be and remain in full force and virtue.

It is a further condition of this obligation that is shall be cancelled as to all subsequent accidents of the principal thirty (30) days after the receipt by the obligee of the surety's written notice of cancellation. Provided, however, that this bond may be continued from year to year by certificate executed by the surety and principal hereon.

Signed, sealed and dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name of Contractor or Company/ Principal Surety

\_\_\_\_\_  
Name of Insurance Company/

\_\_\_\_\_  
By:

\_\_\_\_\_  
By: Attorney-in-Fact

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip Code

\_\_\_\_\_  
City/State/Zip Code

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Phone

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Phone