

RIGHT OF WAY USE BOND

BOND NO.: _____

KNOW ALL MEN BY THESE PRESENTS that we,
* _____, as Principal, and
** _____, as Surety, are

held and firmly bound unto the Board of County Commissioners of the Sarasota County, Florida, in the sum of Fifteen thousand dollars, (\$15,000) for the payment whereof, well and truly be made, we bind ourselves, our successors assigns.

The condition of this obligation is such that whereas, said Principal is granted a Right-of-Way Use Permit under the Provisions of Ordinance 97-051, Road Construction Technical Manual, [Section C.2.a.3)] Land Development Regulations, (which Ordinance requirements are incorporated herein by this reference) in connection with all work performed or to be performed within the County rights-of-way under said Permit.

Now, therefore, if said Principal shall comply with Ordinance 97-051 as set out above, and repair any damages or injury to the road, highway, drainage, utilities, sidewalks or bicycle path by reason of the exercise of the privileges granted in any instrument creating such license and shall repair said road, highway, drainage, utilities, sidewalks or bicycle paths promptly restoring it to a condition at equal to that which existed immediately prior to the infliction of such damage or injury; shall pay all costs and reasonable attorney’s fees incurred by the Board of County Commissioners in the enforcement of this bond; shall hold the said Board of County Commissioners and the members thereof harmless from the payment of any compensation or damages resulting from the exercise of the privileges granted in any instrument creating such license; and shall comply with all provisions in said instrument this bond shall be void; otherwise to remain in full force.

***[Insert name of Principal and address]**
****[Insert name of Bonding Company and physical street address]**

SIGNED AND SEALED this _____ day of _____, 20 _____.

(INSERT FULL NAME OF PRINCIPAL)

WITNESS:

By: _____
(Signature of Pres. or V.P.)***

(Signature)

(Printed Name & Title)

(Printed Name)

***If signatory is not President or Vice President, a corporate resolution or similar authorization evidencing signatory authority must accompany this form.

(INSERT FULL NAME OF SURETY)

WITNESS:

By: _____
(Signature)

(Signature)

(Printed Name and Title)

(Printed Name)

Approved as to Form and Execution

County Attorney

[Attach original Power of Attorney dated same as Bond with original Seal]