

STATE OF IDAHO  
SUBSURFACE SEWAGE DISPOSAL INSTALLER BOND  
BOND NUMBER

KNOW ALL MEN BY THESE PRESENTS:

THAT WE \_\_\_\_\_ As Principal, and  
\_\_\_\_\_ (name of Surety company), with its principal  
office at \_\_\_\_\_, as Surety, are held and firmly  
bound unto the STATE OF IDAHO, DIRECTOR, DEPARTMENT OF ENVIRONMENTAL QUALITY, OR HIS  
DESIGNEE, As Obligee, in the sum of \_\_\_\_\_ (\$ \_\_\_\_\_), for  
the payment of which sum, well and truly to be made, we bind ourselves, our personal  
representatives, and successors and assigns, jointly and severally, firmly by these presents.

SIGNED, SEALED AND DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

THE CONDITION OF THIS OBLIGATION IS SUCH, THAT WHEREAS Principal is desirous of obtaining and  
retaining a license from the DIRECTOR, DEPARTMENT OF ENVIRONMENTAL QUALITY, OR HIS DESIGNEE  
OF THE STATE OF IDAHO, Obligee, to carry on the business as a Subsurface Sewage Disposal  
System Installer, in all counties of the State of Idaho, commencing on the \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_.

NOW THEREFORE, If Principal shall, during the period commencing on the aforesaid date,  
faithfully observe and honestly comply with such Ordinance, Rules and Regulations, and any  
Amendments thereto, as require the execution of this bond, then this obligation shall become  
void and of no effect, otherwise to be and remain in full force and virtue.

PROVIDED, HOWEVER, that the aggregate liability of the Surety for all breaches of  
the conditions of this bond, whether occurring during the period of the original  
license or any and all renewals thereof, shall, in no event, exceed the sum of  
this bond.

THE LIABILITY OF THE SURETY upon this bond shall be and remain in full force and  
effect for the full period of the license issued to the Principal above named,  
but not beyond December 31, 20\_\_\_\_\_, or sixty (60) days after receipt by the  
Obligee of a written notice signed by such Surety, or its authorized agent,  
stating that the liability of such Surety is thereby terminated and cancelled.  
Provided further, that nothing herein shall affect any rights or liabilities  
which shall have accrued under this bond prior to the date of such termination  
and that the maximum liability of the Surety on the bond, regardless of the  
number of claims filed against the bond shall not exceed the sum of  
\_\_\_\_\_ (\$ \_\_\_\_\_).

This bond may be extended for a further term by the issuance of a Continuation  
Certificate signed by the Surety and mailed to the District Health Office at the  
following address. Cancellation notice will be mailed to the District Health  
Office at: 707 North Armstrong Place, Boise, Idaho 83704-0825.

\_\_\_\_\_  
Principal

COUNTERSIGNED:

\_\_\_\_\_  
(Name of Surety Company)

\_\_\_\_\_

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

Idaho Resident Agent

Attorney-in-fact