## **BID BOND**

	VELLUTINI CORPORATION  Recitals: 1. DBA ROYAL ELECTRIC COMPANY "Contractor", has submitted his Contractor's Proposal to County of San Bernardino, "County", for the construction of public work for the <b>Vault Upgrade Project</b> in			
1	accordance with a Notice Inviting Bids of County dated April 10, 2024			
	2. LIBERTY MUTUAL INSURANCE COMPANY			
	aMassachusetts corporation, hereafter called "Surety", is the surety of this Bond.			
	Agreement: We, Contractor as principal and Surety as surety, jointly and severally agree and state follows:			
<ol> <li>The amount of the obligation of this bond is 10% of the amount of the Contractor's Fincluding all bid alternates, and inures to the benefit of County.</li> <li>This Bond is exonerated by (1) County rejecting said Proposal or, in the alternate, (2) Proposal is accepted, Contractor executes the Agreement and furnishes the Bonds as agreed Proposal, otherwise it remains in full force and effect for the recovery of loss, damage and exp County resulting from failure of Contractor to act as agreed to in its Proposal. Some types of possidamage and expense are specified in the Contractor's Proposal.</li> </ol>				
	4. This Bond is binding on our heirs, executors, administrators, successors and assigns.			
	Dated: April 1, 2024			
	By			
** Please Se	"Surety" "Contractors"  ee Attached**			
	STATE OF) ) ss.  COUNTY OF)			
	On before me personally appeared known to me to be the person whose name is subscribed to the within instrument as Attorney in Fact.			
	Notary Public (Seal)			
	(NOTE: Affix corporate seals.)			

# **CALIFORNIA ALL- PURPOSE** CERTIFICATE OF 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 California	}
County of Sacramento	}
On <u>04/08/2024</u> before me, <u>l</u>	_ynette Sanchez, Notary Public (Here insert name and title of the officer)
name(s)(s)are subscribed to the within in he/she/they executed the same in his/he	actory evidence to be the person(s) whose instrument and acknowledged to me that their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of instrument.
I certify under PENALTY OF PERJURY the foregoing paragraph is true and corr	under the laws of the State of California that rect.
WITNESS rny hand and official seal.  Noten Public Signature (Noten)	LYNETTE SANCHEZ Notary Public - California Sacramento County Commission # 2353413 My Comm. Expires Mar 30, 2025
ADDITIONAL OPTIONAL INFORMATION	INSTRUCTIONS FOR COMPLETING THIS FORM  This form complies with current California statutes regarding notary wording and,
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.
(Title or description of attached document)	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which</li> </ul>
(Title or description of attached document continued)  Number of Pages Document Date	must also be the same date the acknowledgment is completed.  The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).  Print the name(s) of document signer(s) who personally appear at the time of notarization.
CAPACITY CLAIMED BY THE SIGNER  ☐ Individual (s) ☐ Corporate Officer President & CEO (Title) ☐ Partner(s) ☐ Attorney-in-Fact ☐ Trustee(s)	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/shc/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.</li> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> <li>Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.</li> <li>Indicate title or type of attached document, number of pages and date.</li> </ul>

Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

• Securely attach this document to the signed document with a staple.

2015 Version www.NotaryClasses.com 800-873-9865

# **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.

Signature

validity of that accument.					
State of California County ofSan Joaquin	)				
OnApril 1, 2024	before me,	Jennifer Loper, Notary Public  (insert name and title of the officer)			
personally appeared					
WITNESS my hand and official s	eal.	JENNIFER LOPER  COMM. #2344049  COMM. #2344049  MOTANY PUBLIC - CALIFORNIA  SAM JOAQUIN COUNTY  My Carrell Expires JAN 27, 2025			



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.

> Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Certificate No: 8207631-969440

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

#### POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Daniel M. Connolly, David Schnapp, Jennifer Loper, Karen Amin all of the city of Lodi, state of CA each individually if there be more than one named, its true and lawful attorney-infact 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 Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 13th day of April 2022

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INSL INS 1919 Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

David M. Carey, Assistant Secretary

#### STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY

On this 13th day of April 2022, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American 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 a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, 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 nber, Pennsylvania Association of Notaries

Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are 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 execution of any such instruments and to attach thereto the seal of the Corporation. When so 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.

ARTICLE XIII - Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company 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 Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary

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 attorneysinfact 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, Renee C. Llewellyn, the undersigned, Assistant Secretary, of Liberty Mutual Insurance Company, The Ohio Casualty Insurance Company, and West American Insurance Company do hereby certify that this power of attorney executed by said Companies 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 Companies this 1st day of April



Renee C. Llewellyn, Assistant Secretary