Surety Bond

Oregon Department of State Lands

For (Removal-Fill Permit / Enforcement File) No. Bond No.

Site Location: Township , Range , Section , Tax Lot(s) , County \_

**KNOW ALL MEN BY THESE PRESENTS:**

That (name of permittee), as principal,

and , a corporation duly licensed to do business in the State of Oregon, as surety are held and firmly bound unto the State of Oregon, acting by and through the Oregon Department of State Lands (Department) in the sum of dollars ($ ) lawful money of the United States for payment of which will and truly to be made we bind ourselves and our legal representatives jointly and severally by these presents.

 Dated this day of , 20 .

The condition of the above obligation is such that whereas the above principal is required to perform compensatory mitigation in accordance with (Removal-Fill Permit No.\_\_\_\_\_\_\_\_ / Enforcement File No.\_\_\_\_\_\_\_\_\_\_ ) pursuant to ORS ORS 196.800 through 196.990.

It is understood and agreed that the Department may grant to principal extensions of time to complete his mitigation plan, which are based upon delays occasioned by causes beyond principal’s control. Such extensions of time shall not cancel the bond, but continue it in full force and effect for the period of such extension of time.

NOW THEREFORE, if the said principal shall faithfully perform the requirements of the mitigation plan filed with the Department, the terms and conditions of his (Removal-Fill permit / Enforcement Order); and the provisions of ORS 196.800 through 196.990; and the rules of said Department adopted thereunder, then this obligation to be void, otherwise to remain in full force and effect. The Surety may not cancel this bond without sending written notice within 45 days of said proposed date and receiving written permission to do so from the Department.

The Surety hereby agrees that prompt notice will be provided to the principal and the Director of the Department of any action filed alleging the insolvency or bankruptcy of said surety or action filed alleging any violations which would result in suspension or revocation of the surety’s license or authorization to conduct business in the State of Oregon.

(Name of Principal – *print or type*) (Name of Surety Company – *print or type*)

(Signature of Principal & Date) (Name & Title of Attorney-in-Fact – *print or type*)

 (Signature & Date)

 (Address)

 (Phone)

# ORIGINAL TO EACH: PRINCIPAL / DEPARTMENT / SURETY

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