

**(NOT TO BE FILLED OUT IF A CASHIER'S CHECK IS SUBMITTED)**

KNOW ALL MEN BY THESE PRESENTS: That the undersigned \_\_\_\_\_, as Principal, and \_\_\_\_\_, as **Surety**, are held and firmly bound unto the **Hillsborough County Aviation Authority** in the sum of 5% of the bid amount shown on Bid Schedule for the payment of which, well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, executors, administrators, successors and assigns.

THE CONDITION OF THIS OBLIGATION is such that if Principal:

1. Does not withdraw the attached Bid Amount shown on Bid Schedule for the Authority **Project Nos. 8505 23 & 8510 23 entitled Wildlife Hazard Remediation & North Employee Parking Lot Expansion at Tampa International Airport** for a period of 115 calendar days after the date on which the Bids are opened; and
2. Enters into a written Contract and furnishes the required Insurance, Certificates of Insurance and Payment and Performance Bonds with surety or sureties acceptable to the **Hillsborough County Aviation Authority** within seven days after the date of award of the Contract, then this obligation will be void; Otherwise the same will be in full force and the full amount of this Bid Bond will be paid to the **Hillsborough County Aviation Authority** as stipulated herein.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

CONTRACTOR MUST INDICATE WHETHER CORPORATION, PARTNERSHIP, COMPANY, (OR INDIVIDUAL). THE PERSON SIGNING FOR THE CONTRACTOR WILL SIGN HIS/HER OWN NAME AND SIGN CORPORATE TITLE. WHEN THE PERSON SIGNING FOR A CORPORATION IS OTHER THAN THE PRESIDENT OR VICE PRESIDENT, HE/SHE MUST FURNISH A CORPORATE RESOLUTION SHOWING HIS/HER AUTHORITY TO BIND THE CORPORATION

(Affix Contractor's Corporate Seal)

\_\_\_\_\_

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

Name of Contractor

(Signature)

Type Name and Title Below:

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

(Affix Surety's Corporate Seal)

\_\_\_\_\_

Name of Surety

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

Attorney in Fact for Surety (Signature)

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

Florida Licensed Agent (Signature)

Type name of Attorney in Fact: \_\_\_\_\_

Type name of Fla. Licensed Agent: \_\_\_\_\_

Attorney in Fact Address: \_\_\_\_\_

License Number: \_\_\_\_\_

Agent Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

Fax Number \_\_\_\_\_

SECTION 00400 2-SURETY BOND AFFIDAVIT

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

BEFORE ME, THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED \_\_\_\_\_ (AGENT), WHO, BEING DULY SWORN, DEPOSES AND SAYS THAT THEY ARE A DULY AUTHORIZED FLORIDA LICENSED INSURANCE AGENT, PROPERLY LICENSED UNDER THE LAWS OF THE STATE OF \_\_\_\_\_, TO REPRESENT \_\_\_\_\_ OF \_\_\_\_\_, A COMPANY AUTHORIZED TO MAKE CORPORATE SURETY BONDS UNDER THE LAWS OF THE STATE OF \_\_\_\_\_ (THE "SURETY").

AGENT FURTHER CERTIFIES THAT  
AS AGENT FOR THE SURETY,  
HE OR SHE HAS SIGNED THE ATTACHED BOND AS A LICENSED AGENT, IN THE SUM OF 5% OF THE BID AMOUNT SHOWN ON BID SCHEDULE, ON BEHALF OF \_\_\_\_\_, TO THE **HILLSBOROUGH COUNTY AVIATION AUTHORITY COVERING PROJECTS 8505 23 & 8510 23, WILDLIFE HAZARD REMEDIATION & NORTH EMPLOYEE PARKING LOT EXPANSION AT TAMPA INTERNATIONAL AIRPORT, TAMPA, FLORIDA.**

AGENT FURTHER CERTIFIES THAT:

- i. SURETY HOLDS A CERTIFICATE OF AUTHORITY AUTHORIZING IT TO WRITE SURETY BONDS IN FLORIDA.
- ii. SURETY HAS BEEN IN BUSINESS AND HAS A RECORD OF SUCCESSFUL CONTINUOUS OPERATIONS FOR THE LAST FIVE YEARS.
- iii. SURETY IS LISTED AND MAINTAINS A CURRENT CERTIFICATE OF AUTHORITY AS AN ACCEPTABLE SURETY ON FEDERAL BONDS AND AS ACCEPTABLE REINSURING COMPANIES IN ACCORDANCE WITH U.S. DEPARTMENT OF TREASURY CIRCULAR 570, CURRENT REVISION. THE AMOUNT OF BONDS ISSUED PURSANT TO THIS CONTRACT WILL NOT EXCEED THE UNDERLYING LIMITATION IN THE FEDERAL REGISTER FOR THAT SURETY.
- iv. SURETY HAS A CURRENT RATING BY A.M. BEST COMPANY OF "A-" OR HIGHER.

**AGENT:**

By: \_\_\_\_\_  
Florida Licensed Insurance Agent (Signature)

Address Of Agent

Phone Number of Agent

Fax Number of Agent

Address Of Surety

Phone Number of Agent

Fax Number of Agent

**SURETY:**

By: \_\_\_\_\_  
Attorney-In-Fact (Signature)

Acknowledgment For  
Attorney-In-Fact

The foregoing instrument was acknowledged  
before me by means of  physical presence or  
 online notarization this \_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by \_\_\_\_\_  
(name of person)  
as Attorney-In-Fact

By: \_\_\_\_\_  
(Signature of Notary Public)

Print, Type, or Stamp Commissioned Name of Notary

Personally Known OR Produced Identification  
Type of Identification Produced

END OF SECTION