## **CONTRA COSTA COUNTY**

### SUBDIVISION AGREEMENT EXTENSION

Development Number: Subdivision 89-07267

Developer: Morgan Capital Investments Properties

Original Agreement Date: April 20, 1999

**Seventh Extension New Termination Date:** April 20, 2016

| Im | pro | vem | ent | Secu | urity |
|----|-----|-----|-----|------|-------|
|    |     |     |     |      |       |

| Surety: International Fidelity Insurance Company |                   |                         |  |  |  |  |
|--|-------------------|-------------------------|--|--|--|--|
| Bond Number CAIFSU 0318                          | 8779 <b>Date:</b> | March 6, 2003           |  |  |  |  |
| Security Type                                    | Security Amo      | Security Amount         |  |  |  |  |
| Cash:  | \$5,800.00        | (1% cash, \$1,000 Min.) |  |  |  |  |
| Surety Bond:                                     | \$115,000.00      | (Performance)           |  |  |  |  |
| h-   | \$292,450.00      | (Labor& Material)       |  |  |  |  |

The Developer and the surety desire this Agreement to be extended through the above date; and Contra Costa County and said surety hereby agree thereto and acknowledge same.

| Dated:   | Dated: May 5, 2015                            |
|--|---|
|  |   |
| FOR CONTRA COSTA COUNTY                          | Developer's Signature(s)                      |
| Julia R. Bueren, Public Works Director           | Oak Branch Lafayette Associates,              |
|  | Sequoia Land Investments -Manager             |
| By:  | Lewis E. Cook, Jr. – President                |
|  | Printed                                       |
| RECOMMENDED FOR APPROVAL:                        | N/A   |
| 1. 11.   | Developer's Signature(s)                      |
| By: My 2/Myre                                    |   |
| (Engineering Services Division)                  |   |
| •  | Printed                                       |
| (NOTE: Developer's, Surety's and Financial       |   |
| Institution's Signatures must be Notarized.)     | Address                                       |
| FORM APPROVED: Victor J. Westman, County Counsel | International Fidelity Insurance Company      |
| After Approval Return to Clerk of the Board      | Surety or Financial Institution               |
|  | 2999 Oak Road, Suite 820                      |
|  | Walnut Creek, CA 94597                        |
|  | Address allen P. O'Hum                        |
|  | Attorney in Facts Signature Colleen P. O'Hara |
|  | Printed                                       |

| 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 Mau n  On May 5, 2015 before me, County of Date  personally appeared Lew 13   | audia Frankel Notary Public,  Here Insert Name and Title of the Officer  Cook, Jr.  Name(s) of Signer(s)   |  |  |  |  |
| subscribed to the within instrument and acknowl  | evidence to be the person(s) whose name(s) is/are edged to me that he/she/they executed the same in s/her/their signature(s) on the instrument the person(s), tted, executed the instrument. |  |  |  |  |
|  | I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.   |  |  |  |  |
| CCAUDIA FRANKEL  Commission # 1934732  Notary Public - California  Marin County  | WITNESS my hand and official seal  |  |  |  |  |
| My Comm. Expires May 29, 2015  Place Notary Seal Above   | Signature of N <mark>otary Public</mark>   |  |  |  |  |
| OP:  | TIONAL information can deter alteration of the document or   |  |  |  |  |
|  | form to an unintended document.  |  |  |  |  |
| Description of Attached Document  Title or Type of Document:  Number of Pages: Signer(s) Other Tha   | Document Date:n Named Above:   |  |  |  |  |
| Capacity(ies) Claimed by Signer(s)   |  |  |  |  |  |
| Signer's Name:   | Signer's Name:   |  |  |  |  |
| Corporate Officer — Title(s):  | Corporate Officer — Title(s):  |  |  |  |  |
| ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact  | ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact  |  |  |  |  |
| ☐ Trustee ☐ Guardian or Conservator  | ☐ Trustee ☐ Guardian or Conservator  |  |  |  |  |
| Other:   | Other:   |  |  |  |  |
| Signer Is Representing:  | Signer Is Representing:  |  |  |  |  |

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 Contra Costa May 11th, 2015 before me, Celeste Cary, Notary Public Date Here Insert Name and Title of the Officer Colleen P. O'Hara personally appeared \_ Name(s) of Signer(s) who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they-executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s)-acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. CELESTE CARY COMM. # 2068805 NOTARY PUBLIC-CALIFORNIA Signature CONTRA COSTA COUNTY
MY COMM. EXP. MAY 18, 2018 Signature of Notary Public Place Notary Seal Above OPTIONAL -Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Title or Type of Document: \_\_\_\_\_ \_\_\_\_\_ Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_ Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name: ☐ Corporate Officer — Title(s): ☐ Corporate Officer — Title(s): \_\_\_\_\_ ☐ Partner — ☐ Limited ☐ General ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact ☐ Individual ☐ Attorney in Fact □ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐ Other: Signer Is Representing: \_\_\_\_ Signer Is Representing: \_\_\_

#### POWER OF ATTORNEY

# INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of Pennsylvania, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

STEPHANIE THOMPSON, DOROTHY O'CONNOR, COLLEEN P. O'HARA, STANLEY ENG, SUSANNA K.P. TRUONG, JULIE L. NICKELS

Walnut Creek, CA.

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 15th day of August, 2000:

"RESOLVED, that (1) the President, Vice President, Executive Vice President or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 22nd day of July, 2014.

STATE OF NEW JERSEY County of Essex

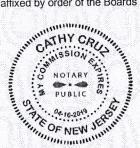
ROBERT W. MINSTER
Executive Vice President/Chief Operating Officer
(International Fidelity Insurance Company)
and President (Allegheny Casualty Company)

for hit

CASUALTY COMPANY
1936
\* ASMNSYLVANIA\*

On this 22nd day of July 2014, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.



A NOTARY PUBLIC OF NEW JERSEY My Commission Expires April 16, 2019

Carty Gra

#### CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand this

11th

day of

May, 2015

Maria A. Granco

MARIA BRANCO, Assistant Secretary