

CONTRA COSTA COUNTY

SUBDIVISION AGREEMENT (RIGHT-OF-WAY LANDSCAPING) EXTENSION

Development Number: SD08-09245 R.O.W.L.

Developer: Shapell Homes, A Division of Shapell Industries, Inc., A Delaware Corporation

Original Agreement Date: July 9, 2013

Second Extension New Termination Date: July 9, 2017

Improvement Security

Surety: The Continental Insurance Company

Bond No. (Date): 929 569 040 (April 14, 2013)

Security Type

Security Amount

Cash:

\$ 2,100.00 (1% cash, \$1,000 Min.)

SURETY BOND

\$ 31,785.00 (Performance)

\$ 107,000.00 (Labor & Material)

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

Dated: December 6, 2016

Dated: September 29, 2016

FOR CONTRA COSTA COUNTY
Julia R. Bueren, Public Works Director

Developer's Signature(s)
Richard M. Nelson
Printed

By: _____

Developer's Signature(s)
Robert D. Murre
Printed

RECOMMENDED FOR APPROVAL:

By: Julia R. Bueren
(Engineering Services Division)

Printed
6920 ICall Center Plz #320 Pleasanton CA 94566

Address
THE CONTINENTAL INSURANCE COMPANY

Surety or Financial Institution
100 Matsonford Road, Suite 200, Radnor, PA 19087

Address

Attorney in Facts Signature
William F. Simkiss
Printed

(NOTE: Developer's, Surety's and Financial Institution's Signatures must be Notarized.)

FORM APPROVED: Victor J. Wustman, County Counsel

After Approval Return to Clerk of the Board

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

Civil Code § 1189

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 PENNSYLVANIA

County of CHESTER

On SEPTEMBER 29, 2016

Date

before me, ARLENE OSTROFF, Notary Public

Name and Title of Notary

personally appeared

WILLIAM F. SIMKISS

Name and or Names 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.

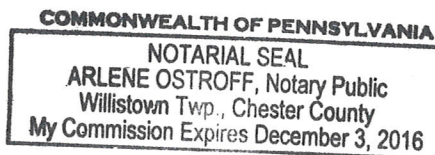
Witness my hand and official seal.

Signature

Arlene Ostroff

Notary Public Signature

Place Notary Public Seal Above



OPTIONAL

Though the information below is not required by law, it may prove valuable to the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document _____

Document Date _____

Number of Pages: _____

Signer's Name: _____

- ☐ Individual
- ☐ Corporate Officer – Title(s): _____
- ☐ Partner - ☐ Limited ☐ General
- ☐ Guardian or Conservator
- ☒ Attorney-in-Fact
- ☐ Trustee
- ☐ Other: _____

Signer is representing
THE CONTINENTAL INSURANCE COMPANY

RIGHT THUMBPRINT
OF SIGNER
Top of thumb

- ☐ Individual
- ☐ Corporate Officer – Title(s): _____
- ☐ Partner - ☐ Limited ☐ General
- ☐ Guardian or Conservator
- ☐ Attorney-in-Fact
- ☐ Trustee
- ☐ Other: _____

Signer is representing _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That The Continental Insurance Company, a Pennsylvania insurance company, is a duly organized and existing insurance company having its principal office in the City of Chicago, and State of Illinois, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

William F Simkiss, Richard J Decker, Daniel P Dunigan, Joseph W Kolok Jr, Brian C Block, James L Hahn,
Individually

of Paoli, PA, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature

- In Unlimited Amounts -


and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the insurance company and all the acts of said Attorney, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law and Resolutions, printed on the reverse hereof, duly adopted, as indicated, by the Board of Directors of the insurance company.

In Witness Whereof, The Continental Insurance Company has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 1st day of July, 2015.

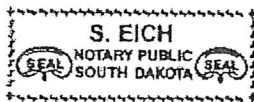


The Continental Insurance Company

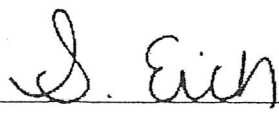

Paul T. Bruflat Vice President

State of South Dakota, County of Minnehaha, ss:

On this 1st day of July, 2015, before me personally came Paul T. Bruflat to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of The Continental Insurance Company, a Pennsylvania insurance company, described in and which executed the above instrument; that he knows the seal of said insurance company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said insurance company and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance company.



My Commission Expires February 12, 2021


S. Eich Notary Public

CERTIFICATE

I, D. Bult, Assistant Secretary of The Continental Insurance Company, a Pennsylvania insurance company, do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the By-Law and Resolution of the Board of Directors of the insurance company printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance company this 29TH day of SEPTEMBER, 2016.



The Continental Insurance Company


D. Bult Assistant Secretary

THE CONTINENTAL INSURANCE COMPANY
Radnor, Pennsylvania
Statement of Net Admitted Assets and Liabilities
December 31, 2015

ASSETS

Bonds	\$ 1,029,630,968
Stocks	154,739,571
Cash and short-term investments	246,391,807
Receivables for securities	18,845
Investment income due and accrued	14,125,269
Amounts recoverable from reinsurers	122,240,351
Funds held by or deposited with reinsured companies	1,850,091
Net deferred tax asset	73,791,202
Premiums and considerations	23,054,396
Other assets	1,019,110
Total Assets	<u>\$ 1,666,861,610</u>

LIABILITIES AND SURPLUS

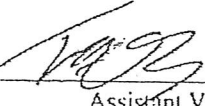
Losses	\$ 774,879,701
Loss adjustment expense	36,650,259
Other expenses	736,867
Unearned premiums	
Ceded reinsurance premiums payable (net of ceding commissions)	27,199,039
Provision for reinsurance	76,000,000
Other liabilities	(717,874,026)
Total Liabilities	<u>\$ 197,591,840</u>

Surplus Account:

Capital paid up	\$ 53,566,360
Gross paid in and contributed surplus	1,423,436,994
Special Surplus	136,028,695
Unassigned funds	(143,762,279)
Surplus as regards policyholders	<u>\$ 1,469,269,770</u>
Total Liabilities and Capital	<u>\$ 1,666,861,610</u>

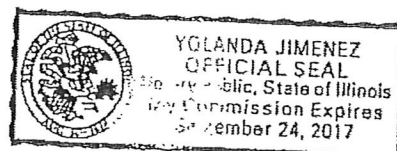
I, Troy Wray, Assistant Vice President of The Continental Insurance Company hereby certify that the above is an accurate representation of the financial statement of the Company dated December 31, 2015, as filed with the various Insurance Departments and is a true and correct statement of the condition of The Continental Insurance Company as of that date.

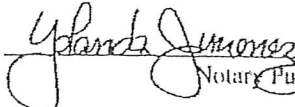
The Continental Insurance Company

By 
Assistant Vice President

Subscribed and sworn to me this 21st day of March, 2016.

My commission expires:




Notary Public

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 Alameda)

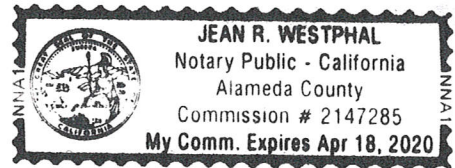
On October 16, 2016 before me, Jean R. Westphal, Notary Public
(insert name and title of the officer)

personally appeared Richard M. Nelson,
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.

Signature Jean R. Westphal (Seal)



ACKNOWLEDGMENT

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State of California
County of Alameda)

On October 16, 2016 before me, Jean R. Westphal, Notary Public
(insert name and title of the officer)

personally appeared Robert D. Moore,
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.

Signature Jean R. Westphal (Seal)

