Subdivision: MS14-00013 Bond No.: ___0715442 Premium: **\$6,659.00**

Any claim under this Bond should be sent

to the following address:

International Fidelity Insurance Company 2999 Oak Rd., #820 Walnut Creek, CA 94597

IMPROVEMENT SECURITY BOND FOR SUBDIVISION AGREEMENT

(Performance, Guarantee and Payment)

(Gov. Code, §§ 66	* .	
1. RECITAL OF SUBDIVISION AGREEMENT. The Principal has install and pay for street, drainage and other improvements in Subdivision MS14-00013 time specified for completion in the Subdivision Agreement, all in accordance with St the Final Map or Parcel Map for said subdivision. Under the terms of the Subdiv performance of the Subdivision Agreement and payment to laborers and materialment.	tate and local laws and rulings thereunder in order to satisfy conditions for filing of vision Agreement, Principal is required to furnish a bond to secure the faithful	
2. OBLIGATION. Pacific Union Property Develop	pers LLC , as Principal,	
andInternational Fidelity Insurance Company	, a corporation organized and existing	
under the laws of the State of and authorized to transact surety business in California, as Surety, hereby jointly and		
severally bind ourselves, our heirs, executors, administrators, successors and assign	ns to the County of Contra Costa, California to pay it:	
(A. Performance and Guarantee) Three Hundred Fifty (\$ 350,460.00) for itself or any city assignee under the above Subdivision	Thousand Four Hundred Sixty and 00/100 Dollars a Agreement.	
One Hundred Seventy-Seven Thou		
(\$_177,000.00 (\$_state of California.) to secure the claims to which reference is made in Title X	(V (commencing with Section 3082) of Part4 of Division III of the Civil Code of the	
3. <u>CONDITION</u> . This obligation is subject to the following condition	ion.	
A. The condition of this obligation as to Section 2.(A) above is such that if the above bounded Principal, his or its heirs, executors, administrators, successors or assigns, shall in all things stand to and abide by, and well and truly keep and perform the covenants, conditions and provisions in the said agreement and any alteration thereof made as therein provided, on his or their part, to be kept and performed at the time and in the manner therein specified, and in all respects according to their true intent and meaning, and shall indemnify and save harmless the County of Contra Costa (or city assignee), its officers, agents and employees, as therein stipulated, then this obligation shall become null and void; otherwise it shall be and remain in full force and effect.		
As part of the obligation secured hereby and in addition to the expenses and fees, including reasonable attorney's fees, incurred by the County of County are constant and included in any judgment rendered.	he face amount specified therefor, there shall be included costs and reasonable Contra Costa (or city assignee) in successfully enforcing such obligation, and to be	
B. The condition of this obligation, as to Section 2.(B) a firmly bound unto the County of Contra Costa and all contractors, subcontractors aforesaid Subdivision Agreement and referred to in the aforesaid Civil Code for Unemployment Insurance Act with respect to this work or labor, and that the Surety and also in case suit is brought upon this bond, will pay, in addition to the face a attorney's fees, incurred by the County of Contra Costa (or city assignee) in success taxed as costs and to be included in the judgment therein rendered.	materials furnished or labor thereon of any kind, or for amounts due under the will pay the same in an amount not exceeding the amount hereinabove set forth, amount thereof, costs and reasonable expenses and fees, including reasonable	
It is hereby expressly stipulated and agreed that this bond sha to file claims under Title 15 (commencing with Section 3082) of Part 4 of Division 3 obrought upon this bond.	all inure to the benefit of any and all persons, companies, and corporations entitled of the Civil Code, so as to give a right of action to them or their assigns in any suit	
Should the condition of this bond be fully performed, then this obligation shall become null and void; otherwise it shall be and remain in full force and effect.		
C. No change, extension of time, alteration, or addition to the terms of said Subdivision Agreement or the work to be performed thereunder or any plan or specifications of said work, agreed to by the Principal and the County of Contra Costa (or city assignee) shall relieve any Surety from liability on this bond; and consent is hereby given to make such change, extension of time, alteration or addition without further notice to or consent by Surety; and Surety hereby waives the provisions of Civil Code Section 2819 and holds itself bound without regard to and independently of any action against the Principal whenever taken.		
SIGNED AND SEALED on March 9 , 20 17 .		
Principal: Pacific Union Property Developers LLC	Surety: International Fidelity Insurance Company	
Address: 675 Hartz Avenue, Suite 300	Address: 2999 Oak Road., #820	
Danville, CA Zip: 94526	Walnut Creek, CA Zip: 94597	
,	By: Sun SM-Eff	
By: Kourwat Print Name: Lon R Waltzer	Print Name: Susan M. Exline	
Title: CFO	Title: Attorney-in-Fact	

[Note: All signatures must be acknowledged. For corporations, two officers must sign. The first signature must be that of the chairman of the board, president, or vice-president; the second signature must be that of the secretary, assistant secretary, chief financial officer, or assistant treasurer. (Civ. Code, § 1190 and Corps. Code, § 313.)]

Form Approved by County Counsel

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 Contra Costa	}
	Stacey Marie Madewell, Notary Public (Here insert name and title of the officer),
name(s)(is)are subscribed to the within he/she/they executed the same in his/he	actory evidence to be the person(s) whose instrument and acknowledged to me that ei/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of e instrument.
I certify under PENALTY OF PERJURY the foregoing paragraph is true and cor	
WITNESS my hand and official seal.	STACEY MARIE MADEWELL Commission # 2100764 Notary Public - California Contra Costa County My Comm. Expires Feb 21, 2019
Notary Public Signature (No	otary Public Seal)
ADDITIONAL OPTIONAL INFORMATION OF THE ATTACHED POOLINENT	if needed, should be completed and attached to the document. Acknowledgments
DESCRIPTION OF THE ATTACHED DOCUMENT Improvement Security Bond for	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
(Title or description of attached document)	 law. State and County information must be the State and County where the document
Subdivision Agreement	signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed.
Number of Pages Document Date_ 3/9/17	 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
CAPACITY CLAIMED BY THE SIGNER ☐ Individual (s) ☐ Corporate Officer	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. 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. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
2015 Version www.NotaryClasses.com 800-873-9865	Securely attach this document to the signed document with a staple.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

Water California Alleronio Confederation Con	0.001.001.001.001.001.001.001.001.001.0
A notary public or other officer completing this certificate document to which this certificate is attached, and not the	verifies only the identity of the individual who signed the truthfulness, accuracy, or validity of that document.
State of California) County of Contra Costa)	
On March 9, 2017 before me, T. Le,	Notary Public Here Insert Name and Title of the Officer
Date	Here Insert Name and Thie of the Office.
personally appeared Susan M. Exline	Name(s) of Signer(s)
subscribed to the within instrument and acknowle his/her/their authorized capacity(ies), and that by his or the entity upon behalf of which the person(s) actor	evidence to be the person(s) whose name(s) is/are dged to me that he/she/they executed the same in /her/their signature(s) on the instrument the person(s), ed, executed the instrument.
0	certify under PENALTY OF PERJURY under the laws f the State of California that the foregoing paragraph strue and correct.
COMMISSION HOSTOCK	VITNESS my hand and official seal.
	SignatureSignature of Notary Public
November 19, 2020 Place Notary Seal Above	
Though this section is optional, completing this i	TIONAL information can deter alteration of the document or form to an unintended document.
Description of Attached Document	D
Title or Type of Document:	Named Above:
	n inamed Above:
Capacity(ies) Claimed by Signer(s)	Signer's Name:
Signer's Name:	☐ Corporate Officer — Title(s):
□ Partner — □ Limited □ General	☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact	☐ Individual☐ Attorney in Fact☐ Guardian or Conservator
☐ 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 New Jersey, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

VIRGINIA L. BLACK, KEVIN RE, M. MOODY, SUSAN M. EXLINE, BETTY L. TOLENTINO, MAUREEN O'CONNELL, ROBERT P. WRIXON, JANET C. ROJO

Lafayette, 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, Chief Executive Officer 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 31st day of December, 2015.

THOUTH IN THE PROPERTY OF THE

STATE OF NEW JERSEY County of Essex

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

Alo mit

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**NEW JERSET*

On this 31st day of December 2015, 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

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

9th

tay of March, 2017

Maria H. Granco

MARIA BRANCO, Assistant Secretary